Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 1 of 73

| Fill in this information to identify your case: |                               |
|---|-------------------------------|
| United States Bankruptcy Court for the:         |                               |
| Northern District of: Illinois (State)          |                               |
| Case number (if known)                          | Chapter you are filing under: |
|   | Chapter 7 Chapter 11          |
|   | Chapter 12 Chapter 13         |

#### Official Form 101

#### Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pá | art 1: Identify Yourself                           |                            |   |
|----|--|----------------------------|---|
|    |  | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name                                     | Dwight                     |   |
|    | Write the name that is on                          | First name                 | First name                                    |
|    | your government-issued picture identification (for | Middle name                | Middle name                                   |
|    | example, your driver's                             | Winters                    |   |
|    | license or passport                                | Last name                  | Last name                                     |
|    | Bring your picture                                 | Jr                         | 0.49.40.4.40                                  |
|    | identification to your meeting with the trustee.   | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
| 2. | All other names you                                |                            |   |
|    | have used in the last                              | First name                 | First name                                    |
|    | 8 years  | Middle name                | Middle name                                   |
|    | Include your married or maiden names.              |                            |   |
|    | maidon namos.                                      | Last name                  | Last name                                     |
|    |  | First name                 | First name                                    |
|    |  |                            |   |
|    |  | Middle name                | Middle name                                   |
|    |  | Last name                  | Last name                                     |
| 3. | Only the last 4 digits                             | XXX - XX- 8298             | xxx - xx-                                     |
|    | of your Social<br>Security number or               |                            |   |
|    | federal Individual                                 | OR                         | OR  |
|    | Taxpayer Identification number                     | 9 xx - xx-                 | 9 xx - xx-                                    |
|    | (ITIN)   |                            |   |

# Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 2 of 73

| Debtor 1 Dwight<br>First Name                                | Winters Middle Name Last Name   | Case number (if known)   |
|--|---|--|
|  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):  |
| 4. Any business names and Employer                           | I have not used any business names or EINs.   | I have not used any business names or EINs.  |
| Identification<br>Numbers (EIN) you<br>have used in the last | Business name   | Business name  |
| 8 years Include trade names and                              | Business name   | Business name  |
| doing business as names                                      | EIN   | EIN  |
|  | EIN   | EIN  |
| 5. Where you live  | 14435 S. Park Ave   | If Debtor 2 lives at a different address:  |
|  | Number Street   | Number Street  |
|  | DoltonIllinois60419CityStateZip Code  | City State Zip Code  |
|  | Cook<br>County  | County   |
|  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
|  | PO Box 4353<br>Number Street  | Number Street  |
|  | Chicago Illinois 60680 City State Zip Code  | City State Zip Code  |
| 6. Why you are   | Check one:  | Check one:   |
| choosing this district to file for bankruptcy                | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                       |
|  | I have another reason. Explain. (See 28 U.S.C. §§ 1408.)  | I have another reason. Explain. (See 28 U.S.C. §§ 1408.)   |
|  |   |  |
|  |   |  |
|  |   |  |
|  |   |  |
|  |   |  |

### Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 3 of 73

| De  | ebtor 1 Dwight  |   | Winters   |  | Case number (if kno   | own)   |  |
|-----|---|---|---|--|---|--|--|
|     | First Name  | Middle Nam  | e Last Name   |  |   |  |  |
| Pa  | rt 2: Tell the Court Abo  | ut Your Bankrup   | tcy Case  |  |   |  |  |
| 7.  | The chapter of the<br>Bankruptcy Code you<br>are choosing to file<br>under  |   | brief description of each, see<br>B2010)). Also, go to the top o  |  |   |  | ndividuals Filing for  |
| 8.  | How you will pay the fee  | more details a cashier's check may pay with  I need to pay Individuals to:  I request that judge may, but the official poyou choose the | entire fee when I file my pabout how you may pay. Tyck, or money order If your a credit card or check with the fee in installments. If a Pay Your Filing Fee in Installment to the fee be waived (You not is not required to, waive overty line that applies to you is option, you must fill our and file it with your petition | rpically, if your attorney is a pre-printed you choose tallments (Omay request your fee, and our family sit the Application of the state of the stat | ou are paying the<br>submitting you<br>ad address.<br>This option, significial Form 103<br>this option only<br>d may do so only<br>ze and you are u | e fee yourself, r payment on y gn and attach to A).  If you are filing the file of the top of the t | you may pay with cash, your behalf, your attorney the Application for ag for Chapter 7. By law, a me is less than 150% of the fee in installments). If |
| 9.  | Have you filed for bankruptcy within the last 8 years?  | No.  Yes. District  District  District  | Northern District of Illinois  Northern District of Illinois  | When<br>When<br>When   | 3/21/2016<br>MM / DD / YYYY<br>5/5/2016<br>MM / DD / YYYY   | Case number _ Case number _ Case number _  | 16-09599<br>16-15369   |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ✓ No.  Yes. Debtor District Debtor District   |   | When<br>When   | MM / DD / YYYY  | Relationship to Case number, i Relationship to Case number, i  | f known  |
| 11. | Do you rent your residence?   | ✓ No.   | e 12. I landlord obtained an eviction Go to line 12. Fill out <i>Initial Statement About</i> this bankruptcy petition.  |  |   |  |  |

### Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 4 of 73

Winters Debtor 1 Dwight \_\_ Case number (if known) Middle Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have **V** No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 5 of 73

 Debtor 1
 Dight
 Winters
 Case number (if known)

 First Name
 Middle Name
 Last Name

#### Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

# Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 6 of 73

| Debtor 1 Dwight First Name  | Winte<br>Middle Name Last N   |  | mber (if known)   |  |
|---|---|--|---|--|
|   | estions for Reporting Purposes  | laine  |   |  |
| 16. What kind of debts do you have?   | 16a. Are your debts primarily cor "incurred by an individual primarily No. Go to line 16b.  Yes. Go to line 17.  16b. Are your debts primarily bus  | marily for a personal, family,<br>siness debts? Business deb<br>stment or through the opera  | ots are debts that you incurred to obtation of the business or investment.  |  |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid that funds  No.   |  | exempt property is excluded and admir<br>to unsecured creditors?  | nistrative   |
| 18. How many creditors do you estimate that you owe?  | ✓ 1-49<br>☐ 50-99<br>☐ 100-199<br>☐ 200-999   | 1,000-5,000<br>5,001-10,000<br>10,001-25,000   | 25,001-50,000<br>50,001-100,000<br>More than 100,000  |  |
| 19. How much do you estimate your assets to be worth?   | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million  | \$1,000,001-\$10 milli<br>\$10,000,001-\$50 mi<br>\$50,000,001-\$100 m<br>\$100,000,001-\$500  | llion \$1,000,000,001-\$1<br>nillion \$10,000,000,001-\$  | 0 billion<br>550 billion                                   |
| 20. How much do you<br>estimate your<br>liabilities to be?  | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million  | \$1,000,001-\$10 milli<br>\$10,000,001-\$50 mi<br>\$50,000,001-\$100 m<br>\$100,000,001-\$500  | llion   | 0 billion<br>550 billion                                   |
| Part 7: Sign Below  |   |  |   |  |
| For you   | correct.  If I have chosen to file under Chapt of title 11, United States Code. I ununder Chapter 7.  If no attorney represents me and I cout this document, I have obtained I request relief in accordance with t I understand making a false statem connection with a bankruptcy case both. 18 U.S.C. §§ 152, 1341, 151 | er 7, I am aware that I may proderstand the relief available and read the notice required the chapter of title 11, United ent, concealing property, or can result in fines up to \$25, and 3571. | d States Code, specified in this petit<br>obtaining money or property by frau<br>50,000, or imprisonment for up to 20 | 11,12, or 13<br>o proceed<br>elp me fill<br>tion.<br>ud in |
|   | Signature of Debtor 1  Executed on10/3/2017   |  | Executed on   |  |
|   | MM / DD / Y   |  | MM / DD / YYYY  |  |

### Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 7 of 73

| Debtor 1 Dwight                                  |                            | Winters               | Case number (if ki           | nown)  |
|--|----------------------------|-----------------------|------------------------------|--|
| First Name                                       | Middle Name                | Last Name             |                              |  |
| For your attorney, if you are represented by one | eligibility to proceed und | ler Chapter 7, 11, 12 | 2, or 13 of title 11, United | ave informed the debtor(s) about States Code, and have explained the so certify that I have delivered to the |
| If you are not                                   | debtor(s) the notice requ  | ired by 11 U.S.C. §   | 342(b) and, in a case in w   | hich § 707(b)(4)(D) applies, certify that I  |
| represented by an                                | have no knowledge after    | an inquiry that the i | information in the schedu    | iles filed with the petition is incorrect.   |
| attorney, you do not                             |                            |                       |                              | ·  |
| need to file this page.                          | /s/ Amy Gerstein           |                       | Date                         | 10/3/2017  |
|  | Signature of Attorney for  | or Debtor             | MN                           | M / DD / YYYY  |
|  | ,                          |                       |                              |  |
|  |                            |                       |                              |  |
|  | Amy Gerstein               |                       |                              |  |
|  | Printed name               |                       |                              |  |
|  | Semrad Law Firm            |                       |                              |  |
|  | Firm name                  |                       |                              |  |
|  | 20 S. Clark Street         |                       |                              |  |
|  | Street                     |                       |                              |  |
|  | 28th Floor                 |                       |                              |  |
|  | 2011 1 1001                |                       |                              |  |
|  | Chicago                    |                       | Illinois                     | 60603  |
|  | City                       |                       | State                        | Zip Code   |
|  |                            |                       |                              |  |
|  | Contact phone              | 3128374023            | Email address                | agerstein@semradlaw.com  |
|  |                            |                       |                              |  |
|  |                            |                       | Illinois                     |  |
|  | Bar number                 |                       | State                        |  |

### Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 8 of 73

| Fill in this information to identify your case: |                           |             |                      |  |  |  |  |  |
|---|---------------------------|-------------|----------------------|--|--|--|--|--|
| Debtor 1  | Dwight                    |             | Winters              |  |  |  |  |  |
|   | First Name                | Middle Name | Last Name            |  |  |  |  |  |
| Debtor 2  |                           |             |                      |  |  |  |  |  |
| (Spouse, if filing)                             | First Name                | Middle Name | Last Name            |  |  |  |  |  |
| United States E                                 | Bankruptcy Court for the: | Northern    | District of Illinois |  |  |  |  |  |
|   |                           |             | (State)              |  |  |  |  |  |
| Case number (If known)                          |                           |             |                      |  |  |  |  |  |

| Check if this is an |
|---------------------|
| amended filing      |

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

|  | V                                 |
|--|-----------------------------------|
|  | Your assets Value of what you own |
| Out and the AVID Developed (OVE state Frame 400 AVID)  |                                   |
| Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B              | \$0.00                            |
| Ta. Copy line 33, Total real estate, IIOIII <i>Octredite N.D.</i>  | Ф74 675 OO                        |
| 1b. Copy line 62, Total personal property, from Schedule A/B   | \$74,675.00                       |
| 1c. Copy line 63, Total of all property on Schedule A/B  | \$74,675.00                       |
| rt 2: Summarize Your Liabilities   |                                   |
|  | Your liabilities                  |
|  | Amount you owe                    |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)                                     | Φ54.504.04                        |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$51,594.24<br>—                  |
| Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)   | \$18,343.58                       |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                     |                                   |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F                  | \$107,677.86                      |
|  | \$177,615.68                      |
| Your total liabilities   |                                   |
|  |                                   |
| Your total liabilities art 3: Summarize Your Income and Expenses   | L <del></del>                     |
| art 3: Summarize Your Income and Expenses  Schedule I: Your Income (Official Form 106I)                            | \$5,452,63                        |
| Summarize Your Income and Expenses   | \$5,452.63                        |
| art 3: Summarize Your Income and Expenses  . Schedule I: Your Income (Official Form 106I)                          | \$5,452.63<br>\$4,272.00          |

Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 9 of 73

| Deb  | tor 1 Dwight  |  | Winters  | Case number (if known)  |            |
|--|---|--|--|---|------------|
| David  | First Name  | Middle Name  | Last Name ive and Statistical Record                   | 40  |            |
| Part   | Allswer These Que   | Suons for Administrat  | ive and Statistical Necord                             | 12  |            |
| 6. <b>A</b>  | re you filing for bankrupto                                     | y under Chapters 7, 11, o  | r 13?  |   |            |
| [  | No. You have nothing to   | report on this part of the fo  | rm. Check this box and submit                          | this form to the court with your other sch  | nedules.   |
| Ŀ  | ✓ Yes.  |  |  |   |            |
| 7. <b>W</b>  | /hat kind of debt do you ha                                     | ive?   |  |   |            |
| [  | Your debts are primaril family, or household pur                | ly consumer debts. Consu<br>pose. 11 U.S.C. § 101(8). F<br>narily consumer debts. Yo | ill out lines 8-10 for statistical p                   | v an individual primarily for a personal,<br>urposes. 28 U.S.C. § 159.<br>s part of the form. Check this box and su | ıbmit      |
|  | uno torri to uno ocure une                                      | your ouror corrounter  |  |   |            |
|  | From the Statement of You<br>Form 122A-1 Line 11; <b>OR</b> , F |  | e: Copy your total current mont<br>orm 122C-1 Line 14. | thly income from Official   | \$6,335.99 |
|  |   |  |  |   |            |
| 9. Copy the following special categories of claims |   | Il categories of claims fro  | m Part 4, line 6 of Schedule                           | E/F:  |            |
|  | From Part 4 on Schedule   | E/F, copy the following:   |  | Total claim   |            |
|  | 9a. Domestic support oblig                                      | ations (Copy line 6a.)   |  | \$0.00  |            |
|  | 9b. Taxes and certain other                                     | debts you owe the governr  | ment. (Copy line 6b.)                                  | \$18,343.58   |            |
|  | 9c. Claims for death or pers                                    | onal injury while you were i   | ntoxicated. (Copy line 6c.)                            | \$0.00  |            |
|  | 9d. Student loans. (Copy lin                                    | ne 6f.)  |  | \$32,094.00   |            |
|  | 9e. Obligations arising out of priority claims. (Copy line 6)   |  | r divorce that you did not repor                       | t as \$0.00   |            |
|  |   | ,  | similar debts. (Copy line 6h.)                         | \$0.00  |            |

\$50,437.58

9g. Total. Add lines 9a through 9f.

Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 10 of 73

| Fill in this                           | inforr                 | nation to identify your c   | ase:  |                      |   |                                       |                            |  |  |
|--|------------------------|---|---|----------------------|---|---------------------------------------|----------------------------|--|--|
| Debtor 1                               |                        | Dwight  |   |                      | Winters   |                                       |                            |  |  |
| Debtor 1                               |                        | First Name  | Middle N  | lame                 | Last Name   |                                       |                            |  |  |
| Debtor 2<br>(Spouse, if fil            | ing)                   | First Name  | Middle N  | lame                 | Last Name   |                                       |                            |  |  |
| United Sta                             | ates Ba                | ankruptcy Court for the:  | Northern  |                      | District of Illinois                              |                                       |                            |  |  |
| Case num                               |                        |   |   |                      | (State)   |                                       |                            |  |  |
| (If known)                             |                        |   |   |                      |   |                                       |                            |  | Check if this is an  |
| Officia                                | ıl Fo                  | orm 106A/B  |   |                      |   |                                       |                            |  | amended filing   |
| Sche                                   | dul                    | e A/B: Prope  | rty   |                      |   |                                       |                            |  | 12/1   |
| category v<br>responsibl<br>write your | where<br>e for<br>name | you think it fits best. E<br>supplying correct infor<br>e and case number (if k | Be as complete a<br>mation. If more s<br>known). Answer e | nd a<br>pace<br>very | •   | o married people<br>arate sheet to th | e are filing<br>is form. O | together, both and the top of any a      | re equally   |
| Part 1:                                | Desc                   | ribe Each Residenc  | e, Building, La   | nd, d                | or Other Real Estate \                            | ou Own or Ha                          | ve an Inte                 | erest In                                 |  |
|  |                        | or have any legal or ed<br>So to Part 2   | quitable interest   | in an                | y residence, building, la                         | nd, or similar pro                    | perty?                     |  |  |
|  |                        |   |   |                      |   |                                       |                            |  |  |
| ш                                      | Yes.                   | Where is the property?  |   |                      |   |                                       |                            |  |  |
| 1.1                                    |                        |   |   | Wh                   | at is the property? Checl<br>Single-family home   | call that apply.                      | the ar                     | nount of any secu                        | claims or exemptions. Put red claims on <i>Schedule D:</i> |
| 1.1                                    | Stree                  | t address, if available, or   | other description   |                      | Duplex or multi-unit build                        | ina                                   | Credit                     | tors Who Have Cla                        | ims Secured by Property.                                   |
|  |                        |   |   |                      | Condominium or coopera                            | =                                     |                            | ent value of the                         | Current value of the                                       |
|  |                        |   |   |                      | Manufactured or mobile h                          | ome                                   | entire                     | e property?                              | portion you own?   |
|  | Num                    | ber Street  |   |                      | Land  |                                       | _                          |  |  |
|  | Nulli                  | bei Street  |   |                      | Investment property                               |                                       |                            |  | f your ownership<br>simple, tenancy by                     |
|  | City                   | State   | Zip Code  |                      | Timeshare<br>Other                                |                                       | the e                      | ntireties, or a life                     | e estate), if known.                                       |
|  | •                      |   | ·   | Wh                   | o has an interest in the <sub>l</sub>             | oroperty? Check                       |                            | Check if this is co<br>see instructions) | ommunity property  |
|  |                        |   |   | on                   |   |                                       |                            |  |  |
|  |                        |   |   |                      | Debtor 1 only                                     |                                       |                            |  |  |
|  |                        |   |   |                      | Debtor 2 only  Debtor 1 and Debtor 2 on           | lv                                    |                            |  |  |
|  |                        |   |   |                      | At least one of the debtors                       | •                                     |                            |  |  |
|  |                        |   |   | Ot                   | ner information you wish                          |                                       | s item. suc                | ch as local                              |  |
|  |                        |   |   |                      | perty identification num                          |                                       |                            |  |  |
| If you                                 | own                    | or have more than one, li   | st here:  |                      |   |                                       |                            |  |  |
| 1.2                                    |                        |   |   | wn                   | at is the property? Checl<br>Single-family home   | call that apply.                      |                            |  | claims or exemptions. Put red claims on <i>Schedule D:</i> |
| 1.2                                    | Stree                  | t address, if available, or   | other description   |                      | Duplex or multi-unit build                        | ina                                   | Credit                     | tors Who Have Cla                        | ims Secured by Property.                                   |
|  |                        |   |   |                      | Condominium or coopera                            | · ·                                   |                            | ent value of the                         | Current value of the                                       |
|  |                        |   |   |                      | Manufactured or mobile h                          |                                       | entire                     | e property?                              | portion you own?   |
|  | Ni                     | h a Chua ah   |   |                      | Land  |                                       |                            |  |  |
|  | Num                    | ber Street  |   |                      | Investment property                               |                                       |                            |  | f your ownership<br>simple, tenancy by                     |
|  | City                   | State   | Zip Code  |                      | Timeshare<br>Other                                |                                       | the e                      | ntireties, or a life                     | e estate), if known.                                       |
|  | J.,                    | Otato   | <b>p</b>  | L                    |   |                                       | _                          | hack if this is co                       | mmunity property   |
|  |                        |   |   | Wh<br>on             | o has an interest in the p                        | property? Check                       |                            | see instructions)                        | minumity property  |
|  |                        |   |   |                      | Debtor 1 only                                     |                                       | Ш                          |  |  |
|  |                        |   |   |                      | Debtor 2 only                                     |                                       |                            |  |  |
|  |                        |   |   |                      | Debtor 1 and Debtor 2 on                          | ly                                    |                            |  |  |
|  |                        |   |   |                      | At least one of the debtors                       | s and another                         |                            |  |  |
|  |                        |   |   |                      | ner information you wish perty identification num |                                       | s item, suc                | ch as local                              |  |

# Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 11 of 73

| Debtor 1                             | Dwight   |  | Winters Case numb   | er (if known)   |  |
|--------------------------------------|--|--|---|---|--|
|                                      | First Name   | Middle Name  | Last Name   |   |  |
| 1.3                                  | et address, if available, or c                             |  | What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home   | the amount of any secu  | claims or exemptions. Put<br>red claims on Schedule D:<br>ims Secured by Property.<br>Current value of the<br>portion you own? |
| Nun<br>City                          | nber Street State  | Zip Code   | Land Investment property Timeshare Other  | Describe the nature o interest (such as fee s the entireties, or a life | simple, tenancy by<br>e estate), if known.   |
|                                      |  |  | Who has an interest in the property? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Other information you wish to add about this item property identification number: | (see instructions)  | mmunity property   |
|                                      | the dollar value of the pove attached for Part 1. W        |  | all of your entries from Part 1, including any entri<br>lere.<br>   | es for pages  |  |
| o you ow<br>ou own the<br>. Cars, va | hat someone else drives. If uns, trucks, tractors, sport u | r <b>equitable interes</b><br>you lease a vehicle, | t in any vehicles, whether they are registered or ralso report it on Schedule G: Executory Contracts and reycles  |   |  |
| 3.1                                  | s<br>Make<br>Model:<br>Year:                               | Jeep<br>Cherokee<br>2015                           | Who has an interest in the property? Check one.  Debtor 1 only  | the amount of any seco  | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.   |
|                                      | Approximate mileage: Other information:                    | 55000  | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  | Current value of the entire property?<br>\$15200.00                     | Current value of the portion you own? \$15200.00   |
|                                      |  |  | Check if this is community property (see instructions)  |   |  |
| 3.2                                  | Make<br>Model:<br>Year:                                    | Chrysler<br>200<br>2015                            | Who has an interest in the property? Check one.  Debtor 1 only  | the amount of any seco  | claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property.  |
|                                      | Approximate mileage: Other information:                    | 30000  | Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  | Current value of the entire property?<br>\$13000.00                     | Current value of the portion you own? \$13000.00   |
|                                      |  |  | Check if this is community property (see instructions)  |   |  |

# Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 12 of 73

| otor i | Dwight<br>First Name  | Middle Name | Winters Last Name  | Case numbe  | 51 (II KNOWI)   |  |
|--------|---|-------------|--|---|---|--|
| 3.3    | Make<br>Model:<br>Year:<br>Approximate mileage:   |             | Who has an interest in the pone.  Debtor 1 only  | roperty? Check  | Do not deduct secured the amount of any secu Creditors Who Have Cla   | •  |
|        | Other information:  |             | Debtor 2 only  Debtor 1 and Debtor 2 only  | V   | Current value of the entire property?   | Current value of the portion you own?  |
|        | Other information.  |             | At least one of the debtors  |   |   |  |
|        |   |             |  |   |   |  |
|        |   |             | Check if this is communi instructions)   | ty property (see  |   |  |
| 3.4    | Make  |             | Who has an interest in the p   | roperty? Check  | Do not deduct secured   |  |
|        | Model:  |             | one.   |   | the amount of any secu<br>Creditors Who Have Cla  |  |
|        | Year: Approximate mileage:  |             | Debtor 1 only  |   | Creditors virio Flave Cia   | ums secured by Fropen  |
|        | Approximate inilicage.  |             | Debtor 2 only  |   | Current value of the  | Current value of the   |
|        | Other information:  |             | Debtor 1 and Debtor 2 only   | у   | entire property?  | portion you own?   |
|        |   |             | At least one of the debtors  | and another   |   |  |
|        |   |             | Check if this is communi instructions)   | ty property (see  |   |  |
| Exar   |   | •           | er recreational vehicles, other v<br>t, fishing vessels, snowmobiles, m  | •   |   |  |
| Exar   | nples: Boats, trailers, motors<br>No  | •           | -  | otorcycle accessori   | Do not deduct secured the amount of any secu  | red claims on <i>Schedule</i>  |
| Exar   | nples: Boats, trailers, motors<br>No<br>Yes<br>Make<br>Model:<br>Year:  | •           | t, fishing vessels, snowmobiles, m  Who has an interest in the p   | otorcycle accessori   | Do not deduct secured   | red claims on <i>Schedule</i>  |
| Exar   | nples: Boats, trailers, motors<br>No<br>Yes<br>Make<br>Model:   | •           | t, fishing vessels, snowmobiles, m  Who has an interest in the p one.  | otorcycle accessori   | Do not deduct secured the amount of any secu Creditors Who Have Cla   | red claims on Schedule ims Secured by Propert Current value of the   |
| Exar   | nples: Boats, trailers, motors<br>No<br>Yes<br>Make<br>Model:<br>Year:  | •           | t, fishing vessels, snowmobiles, m  Who has an interest in the p one.  Debtor 1 only   | roperty? Check  | Do not deduct secured the amount of any secu Creditors Who Have Cla   | red claims on Schedule ims Secured by Propert  |
| Exar   | nples: Boats, trailers, motors<br>No<br>Yes<br>Make<br>Model:<br>Year:<br>Approximate mileage:  | •           | t, fishing vessels, snowmobiles, m  Who has an interest in the p one.  Debtor 1 only Debtor 2 only   | roperty? Check  | Do not deduct secured the amount of any secu Creditors Who Have Cla   | rred claims on Schedule<br>aims Secured by Propert<br>Current value of the   |
| Exar   | nples: Boats, trailers, motors<br>No<br>Yes<br>Make<br>Model:<br>Year:<br>Approximate mileage:  | •           | t, fishing vessels, snowmobiles, m  Who has an interest in the p one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only  | roperty? Check  y and another                                 | Do not deduct secured the amount of any secu Creditors Who Have Cla   | rred claims on Schedule ims Secured by Propertion Current value of the   |
| 4.1    | nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:  | •           | who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions) Who has an interest in the p  | roperty? Check  y and another ty property (see                | Do not deduct secured the amount of any secu Creditors Who Have Cla  Current value of the entire property?  Do not deduct secured   | red claims on Schedule ims Secured by Propertion Value of the portion you own?   |
| 4.1    | nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:  Make  Model:                              | •           | who has an interest in the pone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions)  Who has an interest in the pone.  | roperty? Check  y and another ty property (see                | Do not deduct secured the amount of any secuce Creditors Who Have Classes Current value of the entire property?  Do not deduct secured the amount of any secu   | claims on Schedule control of the portion you own?   |
| 4.1    | nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:  Make  Model:  Year:                       | •           | who has an interest in the pone.  Debtor 1 only Debtor 2 only At least one of the debtors Check if this is communi instructions)  Who has an interest in the pone.  Debtor 1 only  | roperty? Check  y and another ty property (see                | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classifications       | red claims on Schedule ims Secured by Propent Current value of the portion you own?  claims or exemptions. If the claims on Schedule ims Secured by Propentities.  |
| 4.1    | nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:  Make  Model:  Year:  Approximate mileage: | •           | who has an interest in the pone. Debtor 1 only Debtor 2 only At least one of the debtors Check if this is communiinstructions)  Who has an interest in the pone. Debtor 1 only Debtor 2 only   | roperty? Check  y and another ty property (see roperty? Check | Do not deduct secured the amount of any secu Creditors Who Have Classes Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classes Current value of the | red claims on Schedule ims Secured by Propert  Current value of the portion you own?  claims or exemptions. For the portion of |
| 4.1    | nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:  Make  Model:  Year:                       | •           | who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions)  Who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only | roperty? Check  y and another ty property (see roperty? Check | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classifications       | red claims on Schedule ims Secured by Propent Current value of the portion you own?  claims or exemptions. If the claims on Schedule ims Secured by Propentities.  |
| 4.1    | nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:  Make  Model:  Year:  Approximate mileage: | •           | who has an interest in the pone. Debtor 1 only Debtor 2 only At least one of the debtors Check if this is communiinstructions)  Who has an interest in the pone. Debtor 1 only Debtor 2 only   | roperty? Check  y and another ty property (see roperty? Check | Do not deduct secured the amount of any secu Creditors Who Have Classes Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classes Current value of the | claims or schedule portion you own?  claims or exemptions. I lired claims on Schedule aims Secured by Propertion you own?  |
| 4.1    | nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:  Make  Model:  Year:  Approximate mileage: | •           | who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions)  Who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only | roperty? Check  y and another ty property (see roperty? Check | Do not deduct secured the amount of any secu Creditors Who Have Classes Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classes Current value of the | claims or schedule portion you own?  claims or exemptions. I lired claims on Schedule aims Secured by Propertion you own?  |

# Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 13 of 73

| De       | ebtor 1                 | Dwight                           | Winters Case number   | (if known)   |
|----------|-------------------------|----------------------------------|---|--|
|          |                         | First Name                       | Middle Name Last Name   |  |
|          |                         |                                  | our Personal and Household Items re any legal or equitable interest in any of the following items?  | Current value of the portion you own?  Do not deduct secured claims or exemptions. |
|          |                         | _                                | and furnishings<br>liances, furniture, linens, china, kitchenware   |  |
| <u> </u> |                         | Describe                         | Misc. Household Furniture & Goods   | \$2000.00  |
|          |                         | tronics<br>bles: Television      | s and radios; audio, video, stereo, and digital equipment; computers, printers, scanners;   | music  |
| <b>✓</b> | Yes. I                  | Describe                         | Misc. Electronics   | \$1500.00  |
|          |                         | •                                | ue and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; bin, or baseball card collections; other collections, memorabilia, collectibles |  |
|          | No<br>Yes. I            | Describe                         |   |  |
|          | -                       | oles: Sports, ph                 | orts and hobbies notographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; ss; carpentry tools; musical instruments                          | canoes   |
| <b>✓</b> | No<br>Yes. I            | Describe                         |   |  |
|          | <b>0. Fire</b><br>Examp |                                  | les, shotguns, ammunition, and related equipment  |  |
| ✓        | No                      |                                  |   |  |
|          | Yes. I                  | Describe                         |   |  |
|          |                         |                                  | clothes, furs, leather coats, designer wear, shoes, accessories   |  |
| ∐<br>☑   | No<br>Yes. I            | Describe                         | Used Clothing   | \$500.00   |
|          | •                       | •                                | ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, g  | ems,   |
| ✓        | No<br>Yes. I            | Describe                         | Misc. Jewelry   | \$200.00   |
|          | Examp                   | n-farm animal<br>oles: Dogs, cat | s, birds, horses  |  |
|          | No<br>Yes. I            | Describe                         |   |  |
| 1        | 4. Any                  | other persor                     | nal and household items you did not already list, including any health aids you did   | not list   |
| <b>✓</b> | No                      | -                                |   |  |
| İ        | Yes. I                  | Describe                         |   |  |
|          |                         |                                  | lue of all of your entries from Part 3, including any entries for pages you have atta<br>t number here  | 1 \$4200.00  |

# Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 14 of 73

| Debt         | or 1 Dwight First Name                       | Middle Name  | Winters Last Name           | Case number (if known)  |   |
|--------------|--|--|-----------------------------|---|---|
| Part 4       |  |  | Last Name                   |   |   |
| Doy          |  | y legal or equitable interest  | in any of the followir      | ng?   | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. <b>C</b> | xamples: Money you ha                        |  | •                           | on hand when you file your petition                                 | \$25.00   |
| 17.          | Deposits of money<br>Examples: Checking, sa  | avings, or other financial accounts;<br>stitutions. If you have multiple acc | certificates of deposit; sh | Cash: nares in credit unions, brokerage houses, itution, list each. | \$25.00   |
|              | No ✓ Yes                                     |  | Institution name:           |   |   |
|              |  | 17.1. Checking account:  | Bank of America             |   | \$200.00  |
|              |  | 17.2. Checking account:  |                             |   |   |
|              |  | 17.3. Savings account:   | Chicago PO Employee         | CU  | \$50.00   |
|              |  | 17.4. Savings account:   |                             |   |   |
|              |  | 17.5. Certificates of deposit:   |                             |   |   |
|              |  | 17.6. Other financial account:   |                             |   |   |
|              |  | 17.7. Other financial account:   |                             |   |   |
|              |  | 17.8. Other financial account:   |                             |   |   |
|              |  | 17.9. Other financial account:   |                             |   | -   |
| 18.          |  | or publicly traded stocks, investment accounts with brokers                  | age firms, money market     | accounts  |   |
|              |  |  |                             |   |   |
| 19.          | Non-publicly traded s an LLC, partnership, a |  | ted and unincorporated      | businesses, including an interest in                                |   |
|              | Yes. Give specific information about them    | Name of entity   |                             | % of ownership:   |   |
|              |  |  |                             |   |   |

# Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 15 of 73

| Deb | tor 1 Dwight First Name                            | Middle Name  | Winters  Last Name                             | Case number (if known)                      |            |
|-----|--|--|--|---|------------|
| 20. | Government and corpo<br>Negotiable instruments i   | orate bonds and other negotial include personal checks, cashiers ents are those you cannot transfe | ole and non-negotiabl<br>checks, promissory no | ites, and money orders.                     |            |
|     | ✓ No  Yes. Give specific information about them    | Issuer name:   |  |   |            |
| 21. | Retirement or pension<br>Examples: Interests in IF |  | , thrift savings accounts                      | s, or other pension or profit-sharing plans |            |
|     | No No List seek                                    | Type of account:   | Institution name:                              |   |            |
|     | Yes. List each account                             | 401(k) or similar plan:  | Current Employer 401                           | (k)   | \$42000.00 |
|     | separately.  | Pension plan:  |  |   |            |
|     |  | IRA:   |  |   |            |
|     |  | Retirement account:  |  |   |            |
|     |  | Keogh:   |  |   |            |
|     |  | Additional account:  |  |   |            |
|     |  | Additional account:  |  |   |            |
| 22. |  | prepayments I deposits you have made so that with landlords, prepaid rent, public                  |  |   |            |
|     | Yes  | Electric:  |  |   |            |
|     |  | Gas:   |  |   |            |
|     |  | Heating oil:   |  |   |            |
|     |  | Security deposit on rental unit:   |  |   |            |
|     |  | Prepaid rent:  |  |   |            |
|     |  | Telephone:   |  |   |            |
|     |  | Water:   |  |   |            |
|     |  | Rented furniture:  |  |   |            |
|     |  | Other:   |  |   |            |
| 23. | _  | or a periodic payment of money to  | you, either for life or fo                     | r a number of years)                        |            |
|     | ✓ No  Yes  | Issuer name and description:   |  |   |            |
|     |  |  |  |   |            |
|     |  |  |  |   | -          |
|     |  |  |  |   |            |

# Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 16 of 73

| Debt | tor 1 Dwight  | Winters Case number  | (if known)   |  |
|------|---|--|--|--|
| 24.  | First Name Interests in a   | Middle Name Last Name  an education IRA, in an account in a qualified ABLE program, or under a qualified sta   | te tuition program.  |  |
|      | 26 U.S.C. §§  | 530(b)(1), 529A(b), and 529(b)(1).   |  |  |
|      | ✓ No  Yes   | Institution name and description. Separately file the records of any interests.11 U.S.C. § 52  | 1(c):  |  |
|      |   |  |  | -  |
|      |   |  |  | -  |
| 25.  |   | table or future interests in property (other than anything listed in line 1), and rights or for your benefit   | powers   |  |
|      | No Yes. Desc  | cribe  |  |  |
| 26.  |   | pyrights, trademarks, trade secrets, and other intellectual property ternet domain names, websites, proceeds from royalties and licensing agreements |  |  |
|      | No Yes. Desc  | cribe  |  |  |
|      |   |  |  |  |
| 27.  |   | anchises, and other general intangibles uilding permits, exclusive licenses, cooperative association holdings, liquor licenses, profession           | nal licenses   |  |
|      | No No Door  | oribo  |  |  |
|      | Yes. Desc   | Cilibe   |  |  |
|      |   |  |  |  |
| Mor  | ney or prope  | erty owed to you?  |  | Current value of the portion you own? Do not deduct secured claims or exemptions.                                    |
|      | ney or proper   |  |  | portion you own? Do not deduct secured   |
|      | Tax refunds o   | owed to you  | odovali  | portion you own? Do not deduct secured claims or exemptions.   |
|      | Tax refunds of  ✓ No  Yes. Give about   | specific information ut them, including whether  | ederal:  | portion you own? Do not deduct secured claims or exemptions.  \$0.00   |
|      | Tax refunds or  No Yes. Give about  | specific information ut them, including whether already filed the returns the tax years  | tate:  | portion you own? Do not deduct secured claims or exemptions.  \$0.00   |
| 28.  | Tax refunds of  No  Yes. Give about your and a  | specific information ut them, including whether already filed the returns the tax years  |  | portion you own? Do not deduct secured claims or exemptions.  \$0.00   |
| 28.  | Tax refunds or  No Yes. Give about your and a   | specific information ut them, including whether already filed the returns the tax years  | tate:  | portion you own? Do not deduct secured claims or exemptions.  \$0.00   |
| 28.  | Tax refunds or  ✓ No  Yes. Give about your and a second s | specific information ut them, including whether already filed the returns the tax years  | tate:  | portion you own? Do not deduct secured claims or exemptions.  \$0.00   |
| 28.  | Tax refunds or  ✓ No  Yes. Give about your and a second s | specific information ut them, including whether already filed the returns the tax years  | tate:<br>ocal:<br>t, property settlement   | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00                                 |
| 28.  | Tax refunds or  ✓ No  Yes. Give about your and a second s | specific information ut them, including whether already filed the returns the tax years  | tate: ocal: t, property settlement limony: laintenance:  | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  \$0.00                         |
| 28.  | Tax refunds or  ✓ No  Yes. Give about your and a second s | specific information ut them, including whether already filed the returns the tax years  | tate: ocal: t, property settlement limony:   | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  \$0.00  \$0.00  \$0.00         |
| 28.  | Tax refunds or  ✓ No  Yes. Give about your and a second s | specific information ut them, including whether already filed the returns the tax years  | tate:  ocal: t, property settlement limony: laintenance: upport:                                       | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  \$0.00                         |
| 28.  | Tax refunds or  ✓ No  Yes. Give: about you a and a  Family support Examples: Past ✓ No  Yes. Give:  | specific information ut them, including whether already filed the returns the tax years  | tate:  t, property settlement  limony:  laintenance:  upport:  ivorce settlement:  roperty settlement: | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  \$0.00  \$0.00  \$0.00  \$0.00 |
| 28.  | Tax refunds or  ✓ No  Yes. Give: about you a and a  Family support Examples: Past ✓ No  Yes. Give:  Other amount Examples: Unp  | specific information ut them, including whether already filed the returns the tax years  | tate:  t, property settlement  limony:  laintenance:  upport:  ivorce settlement:  roperty settlement: | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  \$0.00  \$0.00  \$0.00  \$0.00 |
| 28.  | Tax refunds or  ✓ No  ── Yes. Give about you and  | specific information ut them, including whether already filed the returns the tax years  | tate:  t, property settlement  limony:  laintenance:  upport:  ivorce settlement:  roperty settlement: | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  \$0.00  \$0.00  \$0.00  \$0.00 |
| 28.  | Tax refunds or  No Yes. Give: about you a and a  Family suppor Examples: Pass No Yes. Give:   | specific information ut them, including whether already filed the returns the tax years  | tate:  t, property settlement  limony:  laintenance:  upport:  ivorce settlement:  roperty settlement: | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  \$0.00  \$0.00  \$0.00  \$0.00 |

# Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 17 of 73

| Deb  | tor 1 Dwight   | Winters   | Case number (if known)                          |   |
|------|--|---|---|---|
|      | First Name   | Middle Name Last Name   |   |   |
| 31.  | Interests in insurance policies Examples: Health, disability, or life in | nsurance; health savings account (HSA); credit, h   | omeowner's, or renter's insurance               |   |
|      | Yes. Name the insurance comp of each policy and list its value.          |   | Beneficiary:                                    | Surrender or refund value:  |
| 32.  |  | ue you from someone who has died<br>trust, expect proceeds from a life insurance policy<br>d. | r, or are currently entitled to receive         |   |
|      | Ves. Describe  |   |   |   |
| 33.  |  | other or not you have filed a lawsuit or made disputes, insurance claims, or rights to sue    | a demand for payment                            |   |
|      | ✓ No  Yes. Describe  |   |   |   |
| 34.  | Other contingent and unliquidate to set off claims                       | ed claims of every nature, including counterc   | laims of the debtor and rights                  |   |
|      | ✓ No ☐ Yes. Describe   |   |   |   |
| 35.  | Any financial assets you did not a                                       | already list  |   |   |
|      | ✓ No Yes. Describe   |   |   |   |
| 36.  |  | r entries from Part 4, including any entries fo   |   | \$42275.00  |
| Part | 5: Describe Any Business-R   | elated Property You Own or Have an Ir   | iterest In. List any real estate in Part        | 1.  |
| 37.  | Do you own or have any legal or e  | equitable interest in any business-related pro  | pperty?   |   |
|      | No. Go to Part 6. Yes. Go to line 38.                                    |   | c<br>pr<br>D                                    | urrent value of the ortion you own? o not deduct secured claims rexemptions |
| 38.  | Accounts receivable or commissi  | ions you already earned   |   |   |
|      | ✓ No  Yes. Describe  | , ,   |   |   |
| 39.  | Office equipment, furnishings, an Examples: Business-related comput      | nd supplies<br>ters, software, modems, printers, copiers, fax ma                              | chines, rugs, telephones, desks, chairs, electr | ronic devices   |
|      | ✓ No  Yes. Describe  |   |   |   |
|      |  |   |   |   |

# Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 18 of 73

| Deb      | tor 1 Dwight             | Winters Case number (if known)   |                                       |
|----------|--------------------------|--|---------------------------------------|
| 1.0      | First Name               | Middle Name Last Name  |                                       |
| 40.      | macninery, fixtures, e   | equipment, supplies you use in business, and tools of your trade   |                                       |
|          | <b>✓</b> No              |  |                                       |
|          | Yes. Describe            |  |                                       |
|          | _                        |  |                                       |
| 11       | Inventory                |  |                                       |
| 41.      | Inventory                |  |                                       |
|          | <b>✓</b> No              |  |                                       |
|          | Yes. Describe            |  |                                       |
|          |                          |  |                                       |
| 42       | Interests in partnersh   | nins or joint ventures   |                                       |
|          |                          | npo of joint voltaroo  |                                       |
|          |                          | Name of entity: % of ownership:  |                                       |
|          | Yes. Give specific       | ,  |                                       |
|          | information about them   | ·  | <del></del>                           |
|          |                          |  |                                       |
|          |                          |  |                                       |
| 43.      | Customer lists. mailing  | lists, or other compilations   |                                       |
|          | — ·                      | ,,   |                                       |
|          | No No                    | (and the constant of the Problem of the defined to 44 H O O 0 404/44 M)  |                                       |
|          | Yes. Do your lists if    | nclude personally identifiable information (as defined in 11 U.S.C. § 101(41A))?   |                                       |
|          | No                       |  |                                       |
|          | Yes. Desc                | ribe   | <u> </u>                              |
|          |                          |  |                                       |
| 44.      | Any business-related     | property you did not already list  |                                       |
|          | <b>✓</b> No              |  |                                       |
|          | Yes. Give specific       | <del></del>  | <del></del>                           |
|          | information              |  |                                       |
|          |                          |  |                                       |
|          |                          |  |                                       |
|          |                          |  |                                       |
|          |                          |  |                                       |
|          |                          |  |                                       |
|          |                          |  |                                       |
| 45 A     | dd the dellar value of a | all of your entries from Part 5, including any entries for pages you have attached                                       |                                       |
|          |                          | all of your entries from Part 5, including any entries for pages you have attached<br>er here                            |                                       |
| <u> </u> |                          |  |                                       |
| Pari     |                          | arm- and Commercial Fishing-Related Property You Own or Have an Interest In.  n interest in farmland, list it in Part 1. |                                       |
|          |                          |  |                                       |
| 46.      | Do you own or have a     | ny legal or equitable interest in any farm- or commercial fishing-related property?                                      |                                       |
|          | No. Go to Part 7.        |  | Current value of the portion you own? |
|          | Yes. Go to line 47.      |  | Do not deduct secured claims          |
|          |                          |  | or exemptions                         |
| 47.      | Farm animals             |  |                                       |
|          | Examples: Livestock, p   | outtry, tarm-raised tish   |                                       |
|          | <b>✓</b> No              |  |                                       |
|          | Yes. Describe            |  |                                       |
|          |                          |  |                                       |
|          |                          |  |                                       |

### Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 19 of 73

| Deb          |  | Winters                | Case number (if known)       | _            |
|--------------|--|------------------------|------------------------------|--------------|
|              |  | Last Name              |                              |              |
| 48.          | Crops-either growing or harvested  |                        |                              |              |
|              | ✓ No   |                        |                              |              |
|              | Yes. Describe  |                        |                              |              |
|              |  |                        |                              |              |
| 49.          | Farm and fishing equipment, implements, machinery, fixtur                                      | es. and tools of trade |                              |              |
|              | _  | 00, 0 100.0 0          |                              |              |
|              | Voa Posseriha  |                        |                              |              |
|              | Yes. Describe  |                        |                              |              |
|              |  |                        |                              |              |
| 50.          | Farm and fishing supplies, chemicals, and feed   |                        |                              |              |
|              | <b>✓</b> No  |                        |                              |              |
|              | Yes. Describe  |                        |                              |              |
|              |  |                        |                              |              |
| E 1          | Any farm- and commercial fishing-related property you did                                      | not already list       |                              |              |
| 31.          |  | not alleady list       |                              |              |
|              | ✓ No   |                        |                              |              |
|              | Yes. Describe  |                        |                              |              |
|              |  |                        |                              |              |
| EO A         | dd the deller velve of all of very entries from Dout C includin                                |                        | a very have attached         |              |
|              | dd the dollar value of all of your entries from Part 6, includin art 6. Write that number here |                        |                              |              |
| <b>&gt;</b>  |  |                        | L                            |              |
|              |  |                        |                              |              |
|              | <u> </u>   |                        |                              |              |
| Part         | 7: Describe All Property You Own or Have an Inter-   | est in That You Did    | Not List Above               |              |
| 53.          | Do you have other property of any kind you did not already                                     | list?                  |                              |              |
|              | Examples: Season tickets, country club membership  |                        |                              |              |
|              | ✓ No   |                        |                              |              |
|              | Yes. Give specific information   |                        |                              |              |
|              |  |                        |                              |              |
|              |  |                        |                              | ·            |
|              | daths dalles at a stall of a second section Board William                                      |                        |                              |              |
| 54. A        | dd the dollar value of all of your entries from Part 7. Write th                               | at number nere         |                              |              |
|              |  |                        |                              |              |
|              |  |                        |                              |              |
|              |  |                        |                              |              |
|              | _  |                        |                              |              |
| Part         | 8: List the Totals of Each Part of this Form   |                        |                              |              |
| 55           | Part 1: Total real estate, line 2  |                        | •                            |              |
| 33.1         | rait i. Total real estate, line 2  |                        |                              |              |
| 56.          | part 2 total vehicles, line 5  | 00 000802              |                              |              |
| 57 6         | Part 3: Total personal and household items, line 15  | \$28200.00             | _                            |              |
|              |  | \$4200.00              | _                            |              |
| 58. <b>F</b> | Part 4: Total financial assets, line 36  | \$42275.00             | <u>_</u>                     |              |
| 59.          | Part 5: Total business-related property, line 45   |                        |                              |              |
| 60.          | Part 6: Total farm- and fishing-related property, line 52                                      |                        | _                            |              |
|              |  | -                      | _                            |              |
|              | Part 7: Total other property not listed, line 54   |                        |                              |              |
| 62.          | Total personal property. Add lines 56 through 61.  | \$74675.00             |                              | + \$74675.00 |
|              |  |                        | Copy personal property total |              |
|              |  |                        |                              | \$74675.00   |
| 63. <b>T</b> | otal of all property on Schedule A/B. Add line 55 + line 62                                    |                        |                              |              |

Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main

| Fill in this info  | ormation to identify your ca   | se:  |  |  |
|--|--|--|--|--|
| Debtor 1   | Dwight   |  | Winters  |  |
| Dalatana   | First Name   | Middle Name  | Last Name  |  |
| Debtor 2<br>(Spouse, if filing)  | First Name   | Middle Name  | Last Name  |  |
| United States  | Bankruptcy Court for the:  | Northern I   | District of Illinois   |  |
| Case number  | •  |  | (State)  |  |
| (If known)   |  |  |  |  |
| Official   | Form 106C  |  |  | Check if this is amended filing  |
| Schedu   | le C: The Prope  | erty You Claim a   | as Exempt  | 04/  |
| _  |  | xempt. Alternatively, yo   | _  | of the property being exempted up to   |
| the amount<br>tax-exempt<br>under a law<br>your exemp<br>Part 1: Ide<br>1. Which s   | cific dollar amount as e<br>of any applicable statu<br>retirement funds—may<br>that limits the exempti<br>otion would be limited to<br>entify the Property You<br>set of exemptions are you  | xempt. Alternatively, you tory limit. Some exempt you be unlimited in dollar to on to a particular dollar to the applicable statuto.  Claim as Exempt elaiming? Check one only, elaral nonbankruptcy exempt  | tions—such as those for health aids, amount. However, if you claim an exer amount and the value of the propert ry amount.  Even if your spouse is filing with you. potions. 11 U.S.C. § 522(b)(3)  | rights to receive certain benefits, and emption of 100% of fair market value   |
| the amount tax-exempt under a law your exempt 1: Ide 1. Which s  | cific dollar amount as e<br>of any applicable statu<br>retirement funds—may<br>that limits the exempti<br>otion would be limited to<br>entify the Property You<br>set of exemptions are you of<br>u are claiming state and fed<br>u are claiming federal exem  | xempt. Alternatively, you tory limit. Some exempt be unlimited in dollar to on to a particular dollar to the applicable statuto.  Claim as Exempt  Plaiming? Check one only, editeral nonbankruptcy exemptions. 11 U.S.C. § 522(b)   | tions—such as those for health aids, amount. However, if you claim an exer amount and the value of the propert ry amount.  Even if your spouse is filing with you. potions. 11 U.S.C. § 522(b)(3)  | rights to receive certain benefits, and  |
| the amount tax-exempt under a law your exempt 1: Ide 1. Which s You 2. For any   | cific dollar amount as ear of any applicable status retirement funds—may a that limits the exemption would be limited to entify the Property You are claiming state and feet are claiming federal exemproperty you list on Schedus Schedule A/B that lists this  | exempt. Alternatively, you tory limit. Some exempt you be unlimited in dollar to on to a particular dollar to the applicable statutor.  Claim as Exempt  Elaiming? Check one only, eleral nonbankruptcy exemptions. 11 U.S.C. § 522(b) tule A/B that you claim as a condition of the c | tions—such as those for health aids, amount. However, if you claim an exer amount and the value of the propert ry amount.  I wen if your spouse is filing with you. options. 11 U.S.C. § 522(b)(3)   | rights to receive certain benefits, and emption of 100% of fair market value   |
| the amount tax-exempt tax-exempt under a law your exempt.  Part 1: Ide  1. Which s  You  2. For any  Brief de line on propert  Brief description   | cific dollar amount as ear of any applicable status of any applicable status of any applicable status of the statu | xempt. Alternatively, yo tory limit. Some exempt be unlimited in dollar to on to a particular dollar to the applicable statuto.  Claim as Exempt  Plaiming? Check one only, eleral nonbankruptcy exemptions. 11 U.S.C. § 522(b) fulle A/B that you claim as a company of the portion you own  Copy the value from  | tions—such as those for health aids, amount. However, if you claim an exer amount and the value of the propert ry amount.  I wen if your spouse is filling with you.  potions. 11 U.S.C. § 522(b)(3)  (2)  exempt, fill in the information below.  | rights to receive certain benefits, and emption of 100% of fair market value by is determined to exceed that amount of the second secon |
| the amount tax-exempt tax-exempt under a law your exempt 1. Ide 1. Which survivors You 2. For any Brief description Schedul Brief description Brief descriptio | cific dollar amount as ear of any applicable status retirement funds—may that limits the exemption would be limited to entify the Property You are claiming state and feet are claiming federal exemproperty you list on Scheduscription of the property a Schedule A/B that lists this you con:    p Cherokee, 2015   | xempt. Alternatively, you tory limit. Some exempt you continue to a particular dollar to the applicable statutor.  Claim as Exempt  Claiming? Check one only, endered nonbankruptcy exemptions. 11 U.S.C. § 522(b) and Current value of the portion you own  Copy the value from Schedule A/B  | amount. However, if you claim an exert amount and the value of the propert ry amount.  It your spouse is filling with you.  It you spouse is filling with you. | rights to receive certain benefits, and emption of 100% of fair market value y is determined to exceed that amour  Specific laws that allow exemption  735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b)  |

☐ No

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

### Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 21 of 73

Debtor 1 Dwight Winters Case number (if known) Last Name

| Brief description of the property and<br>line on Schedule A/B that lists this<br>property | Current value of<br>the portion you<br>own | Amount of the exemption you claim  Check only one box for each exemption. | Specific laws that allow exemption |
|---|--|---|------------------------------------|
|   | Copy the value from Schedule A/B           |   |                                    |
| Brief description:  | \$200.00                                   | <b>C</b> 000.00   | 735 ILCS 5/12-1001(b)              |
| Checking account, Bank of America   |  | \$200.00  | _                                  |
| Line from Schedule A/B: 17  |  | applicable statutory limit  |                                    |
| Brief   | \$50.00                                    |   | 735 ILCS 5/12-1001(b)              |
| description: Savings account,   | φ30.00                                     | \$50.00   | _                                  |
| Chicago PO Employee   |  | 100% of fair market value, up to any applicable statutory limit           |                                    |
| Line from Schedule A/B: 17  |  |   |                                    |
| Brief description:  | \$2,000.00                                 |   | 735 ILCS 5/12-1001(b)              |
| Misc. Household<br>Furniture & Goods  | <u> </u>                                   | \$2,000.00 100% of fair market value, up to any                           | _                                  |
| Line from Schedule A/B: 06  |  | applicable statutory limit  |                                    |
| Brief description:  | \$500.00                                   |   | 735 ILCS 5/12-1001(a)              |
| Used Clothing   |  | \$500.00  | _                                  |
| Line from Schedule A/B: 11  |  | 100% of fair market value, up to any applicable statutory limit           |                                    |
| Brief description:  | \$1,500.00                                 | £1 500 00   | 735 ILCS 5/12-1001(b)              |
| Misc. Electronics   |  | \$1,500.00  | _                                  |
| Line from Schedule A/B: 07  |  | 100% of fair market value, up to any applicable statutory limit           |                                    |
| Brief description:  | \$200.00                                   |   | 735 ILCS 5/12-1001(b)              |
| Misc. Jewelry   | Ψ200.00                                    | \$200.00  | <u>_</u>                           |
| Line from Schedule A/B: 12  |  | 100% of fair market value, up to any applicable statutory limit           |                                    |
| Brief description:  | \$25.00                                    |   | 735 ILCS 5/12-1001(b)              |
| Cash on Hand  | <u> </u>                                   | \$25.00   | <u> </u>                           |
| Line from Schedule A/B: 16  |  | 100% of fair market value, up to any applicable statutory limit           |                                    |
| Brief description:  | \$42,000.00                                |   | 735 ILCS 5/12-1006                 |
| 401(k) or similar plan,   |  | \$42,000.00   | _                                  |
| Current Employer 401(k) Line from Schedule A/B: 21  |  | 100% of fair market value, up to any applicable statutory limit           |                                    |

Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 22 of 73

| Fill in          | this information to identify your o                   | 369.  |   |   |                                      |
|------------------|---|---|---|---|--------------------------------------|
|                  | this information to identity your c                   | asc.  |   |   |                                      |
| Debto            | or 1 Dwight First Name                                | Winters  Middle Name Last Name  |   |   |                                      |
| Debto            |   | Middle Name Last Name   |   |   |                                      |
|                  | se, if filing) First Name                             | Middle Name Last Name   |   |   |                                      |
| Unite            | d States Bankruptcy Court for the:                    | Northern District of Illinois (State)   |   |   |                                      |
| Case<br>(If knov | number<br>wn)   | (July)  |   |   |                                      |
| Off              | icial Form 106D                                       |   | •   |   | Check if this is a<br>amended filing |
| Scl              | hedule D: Credit                                      | tors Who Have Claims Secure   | ed by Prop  | erty  | 12/1                                 |
| Be as            | complete and accurate as poss                         | ble. If two married people are filing together, both are equa   | ally responsible for s  | upplying correct info                                 | ormation. If                         |
|                  |   | ional Page, fill it out, number the entries, and attach it to t   | his form. On the top  | of any additional pa                                  | ges, write your                      |
|                  | and case number (if known).                           |   |   |   |                                      |
| 1.               | Do any creditors have claims                          |   | a nathing also to ran   | ort on this form                                      |                                      |
|                  | <b>'-</b> '   | mit this form to the court with your other schedules. You hav   | e nothing else to rep   | ort on this form.                                     |                                      |
|                  | Yes. Fill in all of the information                   | on below.   |   |   |                                      |
| Part             | 1: List All Secured Claims                            |   |   |   |                                      |
| 2.               | separately for each claim. If more                    | litor has more than one secured claim, list the creditor than one creditor has a particular claim, list the other creditors at the claims in alphabetical order according to the creditor's | Column A  Amount of claim  Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any    |
| 2.1              | FLAGSHIP CREDIT ACCEPT                                | Describe the property that secures the claim:   | \$28,321.00   | \$15,200.00   | \$13,121.00                          |
|                  | Creditor's Name 3 CHRISTY DR STE 201                  | 2015 Jeep Cherokee  |   |   |                                      |
|                  | Number Street   | As of the date you file, the claim is: Check all that apply.  |   |   |                                      |
|                  |   | _ Contingent  |   |   |                                      |
|                  | CHADDS FORD PA 19317                                  | Unliquidated  |   |   |                                      |
|                  | City State ZIP Code Who owes the debt? Check one      | I I Disputed  |   |   |                                      |
|                  | ✓ Debtor 1 only                                       | Nature of lien. Check all that apply.   |   |   |                                      |
|                  | Debtor 2 only   | An agreement you made (such as mortgage or secured  |   |   |                                      |
|                  | Debtor 1 and Debtor 2 only                            | car loan)  Statutory lien (such as tax lien, mechanic's lien)   |   |   |                                      |
|                  | At least one of the debtors and another               | Judgment lien from a lawsuit  |   |   |                                      |
|                  | Check if this claim relates                           | Other (including a right to offset)   |   |   |                                      |
|                  | to a community debt  Date debt was 2/2015             |   |   |   |                                      |
|                  | incurred 2/2013                                       | Last 4 digits of account number1001   |   |   |                                      |
| 2.2              | Quantum3 Group LLC Creditor's Name                    | Describe the property that secures the claim:   | \$23,273.24   | \$13,000.00   | \$10,273.24                          |
|                  | PO Box 788  | 2015 Chrysler 200   |   |   |                                      |
|                  | Number Street   | As of the date you file, the claim is: Check all that apply.  |   |   |                                      |
|                  |   | _ Contingent  |   |   |                                      |
|                  | Kirkland WA 98083 City State ZIP Code                 | _ Unliquidated  |   |   |                                      |
|                  | Who owes the debt? Check one                          | I I Disputed  |   |   |                                      |
|                  | ✓ Debtor 1 only                                       | Nature of lien. Check all that apply.   |   |   |                                      |
|                  | Debtor 2 only   | An agreement you made (such as mortgage or secured car loan)  |   |   |                                      |
|                  | Debtor 1 and Debtor 2 only                            | Statutory lien (such as tax lien, mechanic's lien)  |   |   |                                      |
|                  | At least one of the debtors and another               | Judgment lien from a lawsuit  |   |   |                                      |
|                  | Check if this claim relates                           | Other (including a right to offset)   |   |   |                                      |
|                  | to a community debt  Date debt was 02/26/201 incurred |   |   |   |                                      |
|                  |   | your entries in Column A on this page. Write that number  | \$51,594.24   |   |                                      |

### Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 23 of 73

| Fill in t   | his infor                                     | mation to identify yo  | our case:   |  |   |   |                                   |   |  |   |  |
|---|---|--|---|--|---|---|-----------------------------------|---|--|---|--|
| Debtor  | 1   | Dwight   |   |  | Winte   |   |                                   |   |  |   |  |
| Debtor  | . 2   | First Name   | М   | iddle Name   | Last  | Name  |                                   |   |  |   |  |
| (Spouse   |   | First Name   | М   | iddle Name   | Last  | Name  |                                   |   |  |   |  |
| United  | States E                                      | Bankruptcy Court for   | the: Northern   |  | District of   | Illinois<br>(State)   |                                   |   |  |   |  |
| Case n  | iumber<br>1)                                  |  |   |  |   |   |                                   |   |  |   |  |
| Offic   | ial F   | orm 106E/F   |   |  |   |   |                                   |   | Chec   | k if this is an                                     | amended filing                                 |
| Sch   | nedu  | ule E/F: C   | reditor   | s Who  | Have  | Unsecur   | ed (                              | Claims  | ;  |   | 12/1   |
| other p<br>Form 10<br>claims<br>the ent<br>known) | arty to a 06A/B) a that are ries in t         | e and accurate as pany executory cont and on Schedule G: elisted in Schedule the boxes on the lef  All of Your PRIO reditors have prioring to to Part 2. | racts or unexpinence Executory Conditions W. Creditors W. t. Attach the Conditions RITY Unsecul | red leases th<br>ntracts and U<br>ho Hold Clair<br>ontinuation F<br>red Claims | at could resul<br>Inexpired Leas<br>Ins Secured by<br>Page to this pa                       | t in a claim. Also lis<br>es (Official Form 10<br><i>Property</i> . If more s                       | st exec<br>06G). D<br>space is    | utory contract<br>o not include a<br>s needed, copy | s on <i>Schedul</i><br>any creditors<br>the Part you | e <i>A/B: Prop</i><br>with partia<br>aneed, fill it | erty (Official<br>Ily secured<br>t out, number |
| lis<br>A  | Yes.  ist all of sted, idea is much sontinuat | f your priority unsectify what type of class possible, list the ction Page of Part 1. If the planation of each type.                                     | im it is. If a claim<br>laims in alphabel<br>more than one o                                    | has both pric<br>tical order acc<br>creditor holds                             | ority and nonpri<br>ording to the cr<br>a particular clai                                   | ority amounts, list the<br>editor's name. If you<br>n, list the other credi                         | at claim<br>have m<br>itors in F  | here and show<br>ore than two p                     | both priority  | and nonprior  | rity amounts.                                  |
|   |   |  |   |  |   |   |                                   |   | Total claim  | Priority amount                                     | Nonpriority amount                             |
| 2.1   | IDHS  |  |   |  | Last 4 digits   | of account number   |                                   |   | \$0.00   | \$0.00  | \$0.00   |
|   | 509 S. 6 Number  Springfie                    | eld Illinois<br>State  | Zip (   | 01<br>Code   |   |   |                                   | <u>/a</u><br>eck all that                           |  |   |  |
|   |   | curred the debt? Chotor 1 only   | ieck one.   |  | Disputed  |   |                                   |   |  |   |  |
|   | Deb   | otor 2 only  |   |  |   | RITY unsecured cla  |                                   |   |  |   |  |
|   | Deb   | otor 1 and Debtor 2 o  | nly   |  |   | support obligations d certain other debts   |                                   | a tha   |  |   |  |
|   | At le   | east one of the debto  | rs and another  |  | governme  | ent   | •                                 |   |  |   |  |
|   |   | eck if this claim rela   |   | unity debt   | Claims to intoxicate  | r death or personal ir<br>d   | njury wr                          | nile you were                                       |  |   |  |
|   | Is the c<br>✓ No                              | laim subject to offs   | et?   |  | Other. Spe  | ecify   |                                   |   |  |   |  |
| 0.0   | Yes<br>IRS 1                                  |  |   |  |   |   |                                   |   | ¢18 2/2 58   | \$18,343.58   | 8  |
|   | Priority C                                    | Creditor's Name  |   |  | _   | of account number<br>e debt incurred?   |                                   | <br>/a  | ψ10,040.50   | <u>Ψ10,040.5</u> 0                                  | J <u>\$0.00</u>                                |
|   | PO Box<br>Number                              |  |   |  |   | e you file, the clain   |                                   |   |  |   |  |
|   | Deb Deb Deb At le                             | State curred the debt? Chotor 1 only otor 2 only otor 1 and Debtor 2 deast one of the debto eck if this claim relations subject to offs                  | neck one.  Inly Instructions and another Instructions at the second accomm                      | Code   | apply.  Continge Unliquida Disputed Type of PRIO Taxes and government Claims for intoxicate | RITY unsecured cla<br>support obligations<br>d certain other debts<br>ent<br>r death or personal in | <b>aim:</b><br>you ow<br>njury wh | e the<br>nile you were                              |  |   |  |

### Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 24 of 73

| Debto  | or 1 [   | Dwight  |                        | Winters    | Case number (if known)   |             |  |  |  |  |
|--------|--|---|------------------------|------------|--|-------------|--|--|--|--|
|        |  | First Name  | Middle Name            | Last Name  |  |             |  |  |  |  |
| Part 2 | 2: L   | List All of Your NONPRIC  | ORITY Unsecure         | d Claims   |  |             |  |  |  |  |
| [      | Do any creditors have nonpriority unsecured claims against you?  No. You have nothing to report in this part. Submit this form to the court with your other schedules.  Yes.   |   |                        |            |  |             |  |  |  |  |
| L<br>I | unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. |   |                        |            |  |             |  |  |  |  |
|        |  |   |                        |            |  | Total claim |  |  |  |  |
| 4.1    | Nor<br>c/o   | PITALONE npriority Creditor's Name Pollack & Rosen, P.C mber Street   |                        |            | Last 4 digits of account number 4784 When was the debt incurred? 4/2015  | \$455.00    |  |  |  |  |
|        | Ker City Wh  | 25 Barrett Lakes Blvd Suite 51 nnesaw Geor  | gia 301<br>Zip<br>one. | Code       | As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated  Disputed  Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify CreditCard |             |  |  |  |  |
|        |  | Yes   |                        |            |  |             |  |  |  |  |
| 4.2    | Nor 121 Nur Chi City Wh  | y of Chicago Parking npriority Creditor's Name 1 N. LaSalle St # 107A mber Street  icago Illinoi y State to incurred the debt? Check Debtor 1 only Debtor 2 only At least one of the debtors at Check if this claim relates | Zip one.               | 02<br>Code | Last 4 digits of account number  When was the debt incurred?   | \$7,605.37  |  |  |  |  |
|        |  | No Yes  |                        |            |  |             |  |  |  |  |
| 4.3    | Nor<br>PO  | CREDIT ACCEPTANCE Nonpriority Creditor's Name PO BOX 513 Number Street  |                        |            | Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent   | \$14,334.05 |  |  |  |  |
|        | City Wh  | uthfield Mich y State o incurred the debt? Check Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors at Check if this claim relates the claim subject to offset? No                          | Zip one.               | Code       | Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  ✓ Other. Specify Automobile  |             |  |  |  |  |

#### Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 25 of 73

Winters Debtor 1 Dwight Case number (if known) Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 Crescent Bank & Trust \$2,485.65 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1100 POYDRAS ST Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated **NEW ORLEANS** 70112 Louisiana City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify \_\_ Automobile Is the claim subject to offset? **✓** No Yes ELKHART COUNTY CHILD S \$1,500.00 6225 Last 4 digits of account number \_ Nonpriority Creditor's Name When was the debt incurred? 4/2016 301 S Main St Ste 100 Number As of the date you file, the claim is: Check all that apply. Contingent 46516 Elkhart Indiana Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts 001 InstallmentLoan Other. Specify Is the claim subject to offset? **✓** No Yes **FALLS COLLECTION SVC** 4.6 \$55.00 6962 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 668 When was the debt incurred? 3/2012 Number Street As of the date you file, the claim is: Check all that apply. Contingent GERMANTOWN 53022 Wisconsin Unliquidated City State Zip Code Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another

**✓** No

Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

**V** 

Debts to pension or profit-sharing plans, and other similar

Other. Specify PAYMENT DATA; CHAPTER 13

001 Collection; Collecting for

ORIGINAL CREDITOR: MEDICAL

#### Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 26 of 73

Winters Debtor 1 Dwight Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** \$7,771.87 4.7 HERITAGE ACCEPTANCE Last 4 digits of account number Nonpriority Creditor's Name 120 W LEXINGTON When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated **ELKHART** 46516 Indiana City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_ Automobile Is the claim subject to offset? **✓** No T Yes **IDOR-Bankruptcy Section** \$174.62 4.8 Last 4 digits of account number \_ Nonpriority Creditor's Name PO Box 64338 When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Illinois 60664 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_ Taxes Is the claim subject to offset? **✓** No Yes IRS<sub>1</sub> 4.9 \$23,372.71 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 7346 n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 19101 Philadelphia Pennsylvania Disputed City State Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts

✓ No Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

Other. Specify \_

Taxes

#### Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 27 of 73

Winters Debtor 1 Dwight Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 Midland Funding LLC \$630.66 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 16 McLeland Road Suite 101 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 56303 Saint Cloud Minnesota City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_ Collections Is the claim subject to offset? **✓** No Yes **Nuvell Credit Company** \$11,437.55 4.11 Last 4 digits of account number \_ Nonpriority Creditor's Name PO Box 130424 When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Saint Paul Minnesota 55113 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Automobile Other. Specify \_\_\_ Is the claim subject to offset? **✓** No Yes 4.12 Peoples Gas \$727.38 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 200 E. Randolph n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60601 Chicago Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_ Utility Bill Is the claim subject to offset? **✓** No

#### Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 28 of 73

Winters Debtor 1 Dwight Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 SUNRISE CREDIT SERVICE \$4,934.00 Last 4 digits of account number Nonpriority Creditor's Name 234 AIRPORT PLAZA BLVD S When was the debt incurred? 6/2017 Number Street As of the date you file, the claim is: Check all that apply. Contingent **FARMINGDALE** New York 11735 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collection; Collecting for Is the claim subject to offset? **|** ORIGINAL CREDITOR: AT T **✓** No Other. Specify **MOBILITY** Yes 4.14 USA FUNDS \$4,777.00 Last 4 digits of account number 0565 Nonpriority Creditor's Name P.O. BOX 329250 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Ohio 43232 Columbus Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ Is the claim subject to offset? **✓** No Yes USA FUNDS 4.15 \$4,347.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. BOX 329250 When was the debt incurred? 2/2016 Number As of the date you file, the claim is: Check all that apply. Contingent Ohio 43232 Columbus Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? No

#### Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 29 of 73

Winters Debtor 1 Dwight Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 \$4,199.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. BOX 329250 When was the debt incurred? 2/2016 Number As of the date you file, the claim is: Check all that apply. Contingent Columbus Ohio 43232 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ Is the claim subject to offset? **✓** No Yes 4.17 USA FUNDS \$2,699.00 Last 4 digits of account number 0565 Nonpriority Creditor's Name P.O. BOX 329250 When was the debt incurred? 3/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent Ohio 43232 Columbus Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ Is the claim subject to offset? **✓** No Yes USA FUNDS/NAVIENT 4.18 \$4,797.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 6180 When was the debt incurred? 3/2016 Number As of the date you file, the claim is: Check all that apply. Contingent INDIANAPOLIS 46206 Indiana Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? No

#### Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 30 of 73

Winters Debtor 1 Dwight Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.19 USA FUNDS/NAVIENT \$4,356.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 6180 When was the debt incurred? 2/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent INDIANAPOLIS 46206 Indiana Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ Is the claim subject to offset? **✓** No Yes 4.20 USA FUNDS/NAVIENT \$4,208.00 Last 4 digits of account number 0031 Nonpriority Creditor's Name PO BOX 6180 When was the debt incurred? 2/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent INDIANAPOLIS Indiana 46206 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ Is the claim subject to offset? **✓** No Yes USA FUNDS/NAVIENT 4.21 \$2,711.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 6180 When was the debt incurred? 3/2016 Number As of the date you file, the claim is: Check all that apply. Contingent INDIANAPOLIS 46206 Indiana Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? No

# Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 31 of 73

| Debtor  | 1 Dwight  |                     |                  | Winters             | Case number (if known)  |             |  |  |  |  |
|---------|---|---------------------|------------------|---------------------|---|-------------|--|--|--|--|
|         | First Name                                      | Middle              | Name             | Last Name           |   |             |  |  |  |  |
| Part 2: | Your NONPRIOR                                   | RITY Unsecured      | l Claims - Conti | inuation Page       |   |             |  |  |  |  |
|         | After listing any ent                           | ries on this page,  | number them beg  | inning with 4.5, fo | llowed by 4.6, and so forth.  | Total claim |  |  |  |  |
| 4.22    | Village of Dolton                               |                     |                  | last 4              | - Last 4 digits of account number                                   |             |  |  |  |  |
|         | Nonpriority Creditor's                          |                     |                  |                     |   |             |  |  |  |  |
|         | 14122 Chicago Road Number Street                |                     |                  | wwiten              | When was the debt incurred?n/a                                      |             |  |  |  |  |
|         | Talliboi C                                      | Stroot              |                  | As of t             | he date you file, the claim is: Check all that apply.               |             |  |  |  |  |
|         |   |                     |                  | Со                  | ntingent  |             |  |  |  |  |
|         | Dolton  | Illinois            | 60419            | Un                  | liquidated  |             |  |  |  |  |
|         | City  | State               | Zip Code         | Dis                 | sputed  |             |  |  |  |  |
|         | Who incurred the de                             | ebt? Check one.     |                  | Type o              | Type of NONPRIORITY unsecured claim:                                |             |  |  |  |  |
|         | Debtor 1 only                                   |                     |                  | □ Stu               |   |             |  |  |  |  |
|         | Debtor 2 only                                   |                     |                  |                     | Student loans  Obligations arising out of a separation agreement or |             |  |  |  |  |
|         | Debtor 1 and Del                                | btor 2 only         |                  |                     | orce that you did not report as priority claims                     |             |  |  |  |  |
|         | At least one of th                              | e debtors and anoth | ner              | De de               | bts to pension or profit-sharing plans, and other simots            | nilar       |  |  |  |  |
|         | Check if this claim relates to a community debt |                     |                  |                     | ner. Specify Tickets  |             |  |  |  |  |
|         | Is the claim subject                            | to offset?          |                  | <b>✓</b> Oth        | <u>-                                    </u>                        |             |  |  |  |  |
|         | <b>✓</b> No                                     |                     |                  |                     |   |             |  |  |  |  |
|         | Yes   |                     |                  |                     |   |             |  |  |  |  |

### Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 32 of 73

| collection agency collection agency | is trying to colle<br>here. Similarly, i | ct from you for a deb<br>f you have more thai | ot you owe to someor<br>n one creditor for any                         | ne else, list the<br>of the debts th                                   | ou already listed in Parts 1 or 2. For example, if a original creditor in Parts 1 or 2, then list the at you listed in Parts 1 or 2, list the additional or 2, do not fill out or submit this page. |  |  |  |  |
|-------------------------------------|--|---|--|--|---|--|--|--|--|
| Harris & Harris LTD                 |  |   |  | in Daniel an Da  | nt O did list the enisinal anaditano  |  |  |  |  |
| Name                                |  |   | On which entry   | On which entry in Part 1 or Part 2 did you list the original creditor? |   |  |  |  |  |
| 111 West Jackson                    | Boulevard Suite 4                        | 00  | Line 4.2   | of (Check  | Part 1: Creditors with Priority Unsecured Claims  |  |  |  |  |
| Number Street                       |  |   | <u></u>  | one):  | Part 2: Creditors with Nonpriority Unsecured Claims   |  |  |  |  |
| Chicago                             | Illinois                                 | 60604   | Last 4 digits of   | account numbe  | er  |  |  |  |  |
| City                                | State                                    | Zip Code                                      |  |  | <u> </u>  |  |  |  |  |
| Hogan, Shaney<br>Name               |  |   | On which entry   | in Part 1 or Pa  | rt 2 did you list the original creditor?  |  |  |  |  |
| 2608 California Roa                 | ad                                       |   | Line 2.1   | of (Check  | ✓ Part 1: Creditors with Priority Unsecured Claims  |  |  |  |  |
| Number Street                       |  |   |  | one):  | Part 2: Creditors with Nonpriority Unsecured  |  |  |  |  |
| Elkhart                             | Indiana                                  | 46514   |  | — Claims   |   |  |  |  |  |
| City                                | State                                    | Zip Code                                      | Last 4 digits of   | account number   | er  |  |  |  |  |
| ,                                   | Oldio                                    | 2.0 0000                                      |  |  |   |  |  |  |  |
| Lewis, Veronica<br>Name             |  |   | On which entry in Part 1 or Part 2 did you list the original creditor? |  |   |  |  |  |  |
| 4119 W. 192nd Pla                   | 200                                      |   | Line 2.1   | of (Check  | Port 1. Craditara with Priority Unaccured Claims  |  |  |  |  |
| Number Street                       | 100                                      |   |  | one):  | ✓ Part 1: Creditors with Priority Unsecured Claims  |  |  |  |  |
|                                     |  |   |  |  | Part 2: Creditors with Nonpriority Unsecured Claims   |  |  |  |  |
| Country Club<br>Hills               | Illinois                                 | 60478   | Last 4 digits of account number  |  |   |  |  |  |  |
| City                                | State                                    | Zip Code                                      |  |  |   |  |  |  |  |
| IDHS c/o Terri Nunr                 | nally                                    |   |  |  |   |  |  |  |  |
| Name                                | -  |   | On which entry   | in Part 1 or Pa  | rt 2 did you list the original creditor?  |  |  |  |  |
| 509 S. 6th Street                   |  |   | Line 2.1   | of (Check  | Part 1: Creditors with Priority Unsecured Claims  |  |  |  |  |
| Number Street                       |  |   |  | one):  | Part 2: Creditors with Nonpriority Unsecured Claims   |  |  |  |  |
| Springfield                         | Illinois                                 | 62701   | Last 4 digits of   | account numbe  |   |  |  |  |  |
| City                                | State                                    | Zip Code                                      | Last 4 digits 01   | account number   | <u> </u>  |  |  |  |  |
| IDHS c/o Katrina Bo                 | oarden                                   |   |  |  |   |  |  |  |  |
| Name                                |  |   | On which entry   | in Part 1 or Pa  | rt 2 did you list the original creditor?  |  |  |  |  |
| 509 S. 6th Street                   |  |   | Line 2.1   | of (Check  | Part 1: Creditors with Priority Unsecured Claims  |  |  |  |  |
| Number Street                       |  |   |  | one):  | Part 2: Creditors with Nonpriority Unsecured Claims   |  |  |  |  |
| Springfield                         | Illinois                                 | 62701   | Last 4 digits of   | account numbe  |   |  |  |  |  |
| City                                | State                                    | Zip Code                                      | Last 4 digits 01   | account numbe  |   |  |  |  |  |

Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 33 of 73

Debtor 1 Dwight Winters Case number (if known)

#### Middle Name First Name Last Name Part 4: Add the Amounts for Each Type of Unsecured Claim Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 Total claims 6a. Domestic support obligations. from Part 1 \$18,343.58 6b. Taxes and certain other debts you owe the government \$0.00 6c. Claims for death or personal injury while you were intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$18,343.58 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$32,094.00 **Total claims** 6f. Student loans from Part 2 \$0.00 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims \$0.00 6h. Debts to pension or profit-sharing plans, and other similar \$75,583.86 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$107,677.86 6j. Total. Add lines 6f through 6i.

Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 34 of 73

| Fill in this information to identify your case: |                           |             |                              |  |  |  |  |  |  |
|---|---------------------------|-------------|------------------------------|--|--|--|--|--|--|
| Debtor 1  | Dwight                    | Winters     |                              |  |  |  |  |  |  |
|   | First Name                | Middle Name | Last Name                    |  |  |  |  |  |  |
| Debtor 2  |                           |             |                              |  |  |  |  |  |  |
| (Spouse, if filing)                             | First Name                | Middle Name | Last Name                    |  |  |  |  |  |  |
| United States E                                 | Bankruptcy Court for the: | Northern    | District of Illinois (State) |  |  |  |  |  |  |
| Case number<br>(If known)                       |                           |             | ()                           |  |  |  |  |  |  |

#### Official Form 106G

#### Check if this is an amended filing

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or co            | ompany with whom you have | the contract or lease | State what the contract or lease is for                 |
|-------------------------|---------------------------|-----------------------|---|
| 2.1 Waddles, Sh<br>Name | navonda                   | _                     | Residential Lease,<br>Debtor is Lessee,<br>Annual Lease |
| 14435 S. Pa             | ark Avenue                |                       |   |
| Number                  | Street                    |                       |   |
| Dolton                  | Illinois                  | 60419                 |   |
| City                    | State                     | Zip Code              |   |

### Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main

|                                 |                                | DO  | Cument Pa                    | ye 35 01 73     | 1                           |                                    |
|---------------------------------|--------------------------------|---|------------------------------|-----------------|-----------------------------|------------------------------------|
| Fill in this info               | ormation to identify your      | case:   |                              |                 |                             |                                    |
| Debtor 1                        | Dwight<br>First Name           | Middle Name   | Winters<br>Last Name         |                 |                             |                                    |
| Debtor 2<br>(Spouse, if filing) | First Name                     | Middle Name   | Last Name                    |                 |                             |                                    |
| United States                   | Bankruptcy Court for the:      |   | District of Illinois         |                 |                             |                                    |
|                                 | . ,                            | Notation  | (State)                      |                 |                             |                                    |
| Case number<br>(If known)       |                                |   |                              |                 |                             |                                    |
|                                 |                                |   |                              |                 |                             | Check if this is an                |
| Otticial                        | Farm 10611                     |   |                              |                 |                             | amended filing                     |
| Official                        | Form 106H                      |   |                              |                 |                             |                                    |
| Schedu                          | le H: Your Co                  | debtors   |                              |                 |                             | 12/15                              |
| -                               |                                | ou are filing a joint case, do                          | not list either spouse a     | as a codebtor.) |                             |                                    |
|                                 |                                | lived in a community pro<br>xico, Puerto Rico, Texas, W |                              |                 | property states and territo | ories include Arizona, California, |
|                                 | . Go to line 3.                |   | La al Para Mila de la calant |                 |                             |                                    |
| ☐ Yes                           | s. Did your spouse, form<br>No | er spouse, or legal equiva                              | lent live with you at tr     | ne time?        |                             |                                    |
|                                 |                                | ty state or territory did you                           | ı live?                      | Fill in the     | name and current addres     | s of that person.                  |
|                                 | Name of your spouse,           | former spouse, or legal equ                             | ivalent                      |                 |                             |                                    |
|                                 | Number Street                  |   |                              |                 |                             |                                    |
|                                 | City                           | State   | Zip                          | Code            |                             |                                    |
|                                 | · ·                            | btors. Do not include you<br>person is a quarantor or c | •                            |                 |                             | the person shown in line 2         |

Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor Column 2: The creditor to whom you owe the debt Check all schedules that apply:

Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 36 of 73

|   |   | 20   | oamone   | . ago oo         |                     |   |                            |  |
|---|---|--|--|------------------|---------------------|---|----------------------------|--|
| Fill in this in                                 | formation to identify   | your case:   |  |                  |                     |   |                            |  |
| Debtor 1  | Dwight  |  | Winter   | S                |                     |   |                            |  |
|   | First Name  | Middle Name  | Last N   | ame              | — Che               | eck if this is:                         |                            |  |
| Debtor 2<br>(Spouse, if filing                  | ) First Name  | Middle Nome  | Loot N   | omo              | -   -               | An amended filing                       |                            |  |
| (Spouse, it filling                             | First Name  | Middle Name  | Last N   |                  |                     | · ·                                     | g post-petition chapter 13 |  |
| United States the: Case number                  | Bankruptcy Court for  | Northern   | District of Illii  | nois<br>state)   |                     | expenses as of the fol                  |                            |  |
| (If known)                                      |   |  |  |                  | _                   | MM / DD / YYYY                          |                            |  |
| Official  | Form 106I   |  |  |                  |                     |   |                            |  |
| Schedu  | le I: Your In   | come   |  |                  |                     |   | 12/15                      |  |
| information a<br>spouse. If mo<br>number (if ki | about your spouse. I  |  | d your spous   | se is not filing | with you, do        | not include informa                     | ation about your           |  |
| _   | ır employment   |  | Debtor 1   |                  |                     | Debtor 2                                |                            |  |
| informati                                       | on.   | Employment status  | Employed  Not Employed  Human Resources  USPS  433 W Harrison St |                  |                     | Employed  Not Employed  Self-employment |                            |  |
| attach a s                                      | e more than one job,<br>eparate page with<br>n about additional | zimproyimoni diatao  |  |                  |                     |   |                            |  |
| employers                                       | s.  | Occupation   |  |                  |                     |   |                            |  |
|   | art time, seasonal, or  | Employer's name  |  |                  |                     |   |                            |  |
| seir-empio                                      | oyed work.  | Employer's address   |  |                  |                     | _                                       |                            |  |
|   | n may include student<br>aker, if it applies.                   |  |  | eet              |                     | Number Street                           |                            |  |
|   |   |  |  |                  |                     |   |                            |  |
|   |   |  | Chicago  | Illinois         | 60669               | <u>-</u>                                |                            |  |
|   |   |  | City   | State            | Zip Code            | City                                    | State Zip Code             |  |
|   |   | How long employed there?                                   | 9 years 8 r  | months           |                     |   | _                          |  |
| Part 2: Gi                                      | ve Details About N  | Nonthly Income   |  |                  |                     |   |                            |  |
|   | onthly income as of test you are separated.                     | the date you file this form                                | <b>n.</b> If you have  | nothing to repo  | ort for any line, v | write \$0 in the space. I               | nclude your non-filing     |  |
|   | r non-filing spouse hav<br>, attach a separate she              | e more than one employer,<br>et to this form.              | combine the  | information for  | all employers fo    |   | nes below. If you need     |  |
|   |   |  |  | For              | Debtor 1            | For Debtor 2 or non-filing spouse       |                            |  |
|   |   | ary, and commissions (befo<br>, calculate what the monthly |  | 2.               | \$5,771.00          |   | 0.00                       |  |
| 3. Estimat                                      | e and list monthly ove  | rtime pay.   |  | 3.               | + \$0.00            | + \$0                                   | 0.00                       |  |

4. Calculate gross income. Add line 2 + line 3.

\$5,771.00

\$0.00

# Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 37 of 73

| Deb.                  | tor 1Dwight<br>First Name   |  | inters<br>st Name | Case numbei<br>known)  | r <i>(if</i>                      |       |                         |
|-----------------------|---|--|-------------------|------------------------|-----------------------------------|-------|-------------------------|
|                       |   | ad.o . ta.i.o  | 01111111          | For Debtor 1           | For Debtor 2 or non-filing spouse |       |                         |
| Co                    | ppy line 4 here   |  | <b>→</b> 4.       | \$5,771.00             | \$0.00                            |       |                         |
| 5. <b>Li</b> s        | st all payroll deductions:  |  |                   |                        |                                   |       |                         |
| 58                    | a. Tax, Medicare, and Social Secu   | urity deductions   | 5a.               | \$1,373.41             | \$0.00                            |       |                         |
| 51                    | o. Mandatory contributions for re   | tirement plans   | 5b.               | \$46.17                | \$0.00                            |       |                         |
| 50                    | c. Voluntary contributions for reti   | rement plans   | 5c.               | \$0.00                 | \$0.00                            |       |                         |
| 50                    | d. Required repayments of retire  | ment fund loans  | 5d.               | \$0.00                 | \$0.00                            |       |                         |
| 56                    | e. Insurance  |  | 5e.               | \$496.36               | \$0.00                            |       |                         |
| 5f                    | f. Domestic support obligations   |  | 5f.               | \$1,500.94             | \$0.00                            |       |                         |
| 5                     | g. <b>Union dues</b>  |  | 5g.               | \$32.50                | \$0.00                            |       |                         |
| 51                    | n. Other deductions. Specify:   |  | 5h. +             | \$0.00 +               | \$0.00                            |       |                         |
| 6. <b>A</b> d<br>+5h. | ld the payroll deductions. Add line   | es 5a + 5b + 5c + 5d + 5e +5f +  | - 5g 6.           | \$3,449.38             | \$0.00                            |       |                         |
| 7. <b>C</b> a         | liculate total monthly take-home  | pay. Subtract line 6 from line 4   | 7.                | \$2,321.63             | \$0.00                            |       |                         |
| 8. <b>Lis</b>         | st all other income regularly rece  | eived:   |                   |                        |                                   |       |                         |
| 88                    | a. Net income from rental proper business, profession, or farm  |  |                   |                        |                                   |       |                         |
|                       | Attach a statement for each proper gross receipts, ordinary and necessity   |  |                   |                        |                                   |       |                         |
|                       | the total monthly net income.   |  | 8a.               | \$0.00                 | \$2,400.00                        |       |                         |
| 81                    | o. Interest and dividends   |  | 8b.               | \$0.00                 | \$0.00                            |       |                         |
| 80                    | c. Family support payments that dependent regularly receive   |  |                   |                        |                                   |       |                         |
|                       | Include alimony, spousal support divorce settlement, and property s   |  | 8c.               | \$0.00                 | \$0.00                            |       |                         |
| 80                    | d. Unemployment compensation  |  | 8d.               | \$0.00                 | \$0.00                            |       |                         |
| 86                    | e. Social Security  |  | 8e.               | \$0.00                 | \$0.00                            |       |                         |
| 81                    | f. Other government assistance t<br>Include cash assistance and the v<br>cash assistance that you receive, s<br>under the Supplemental Nutrition<br>housing subsidies<br>Specify:<br>Food Assistance Programs Incon | alue (if known) of any non-<br>such as food stamps (benefits<br>Assistance Program) or | 8f.               | \$0.00                 | \$565.00                          |       |                         |
| 80                    | g. Pension or retirement income   | ···  | 8g.               | \$0.00                 | \$0.00                            |       |                         |
|                       | n. Other monthly income. Specify:   | Prorated Tax Refund  | 8h. +             | \$166.00 +             |                                   |       |                         |
|                       | Id all other income Add lines 8a +  |  | 3h. 9.            | \$166.00               | \$2,965.00                        |       |                         |
| 10.0                  | alaulata manthir inaama Add iia   | . 7 . line 0   | 10 F              | Ф0 407 00              | Φ0.005.00                         |       | Ø5 450 00               |
|                       | alculate monthly income. Add line dd the entries in line 10 for Debtor 1  |  | 10.<br>use        | \$2,487.63             | \$2,965.00                        | =     | \$5,452.63              |
| In<br>fri             | State all other regular contribution<br>clude contributions from an unman<br>ends or relatives.<br>o not include any amounts already  | ried partner, members of your h  | ousehold, your o  | dependents, your roomn |                                   |       |                         |
| S                     | pecify:   |  |                   |                        |                                   | 11. + | \$0.00                  |
|                       | Add the amount in the last colum<br>frite that amount on the Summary o  |  |                   |                        |                                   | 12.   | \$5,452.63              |
|                       | The that amount on the <i>Summary o</i>   |  | •                 |                        | <i>иа</i> , II II арриеѕ          |       | Combined monthly income |
| 13. 6                 | No.   | iouse within the year after yo   | w me uns ivim     | •                      |                                   |       |                         |
|                       | Yes. Explain:   |  |                   |                        |                                   |       |                         |
|                       |   |  |                   |                        |                                   |       |                         |

Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 38 of 73

| Debtor 1Dwight                        |                     |               | ters           |              | Case number (if |            |   |
|---------------------------------------|---------------------|---------------|----------------|--------------|-----------------|------------|---|
| First Name                            | Middle Name         | Las           | t Name         |              | known)          |            |   |
| Official Form 1061. Addit             | ional page.         |               |                |              |                 |            |   |
| 8a.Net income from rental property    | and from operating  | a business, ¡ | profession, or | farm         |                 |            |   |
| 8a.1 Self Employment - Beauticia      | n                   | Debtor 1      | Debtor 2       |              |                 |            |   |
| Gross receipts (before all deductio   | ns)                 |               | \$3,000.00     |              |                 |            |   |
| Ordinary and necessary operating      | expenses            |               | -\$600.00      |              |                 |            |   |
| Net monthly income from a busine farm | ess, profession, or |               | \$2,400.00     | Copy<br>here |                 | \$2,400.00 | _ |

Official Form 106l Schedule I: Your Income page 3

## Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 39 of 73

| Fill in this infor              | mation to identify you                     | r case:   |   |                                      |  |                |
|---------------------------------|--|---|---|--------------------------------------|--|----------------|
| Debtor 1                        | Dwight<br>First Name                       | Middle Name   | Winters Last Name   |                                      |  |                |
| Debtor 2                        |  |   |   | Check if this is:  An amended filing | ng.  |                |
| (Spouse, if filing)             | First Name                                 | Middle Name   | Last Name   | 브                                    | ·  | h 1 <b>1</b> 0 |
|                                 | Bankruptcy Court for th                    | e: Northern [   | District of Illinois (State)  |                                      | howing post-petition cl<br>the following date: | napter 13      |
| Case number<br>(If known)       | _  |   |   | MM / DD / YYYY                       | <del>/</del>                                   |                |
| Official                        | Form 106J                                  |   |   |                                      |  |                |
| Schedul                         | e J: Your Ex                               | penses  |   |                                      |  | 12/15          |
| information. If (if known). Ans | -  | d, attach another sheet to this   | e filing together, both are equall<br>form. On the top of any additions |                                      |  | er e           |
| 1. Is this a joi                | nt case?                                   |   |   |                                      |  |                |
| ✓ No. Go                        | to line 2                                  |   |   |                                      |  |                |
| Yes. Do                         | oes Debtor 2 live in a                     | separate household?   |   |                                      |  |                |
|                                 | No   |   |   |                                      |  |                |
|                                 | Yes. Debtor 2 must                         | t file Official Forms 106J-2, Expen                                       | ses for Separate Household of Debi                                      | for 2.                               |  |                |
| 2. Do you hav                   | e dependents?                              | No  |   |                                      |  |                |
| Do not list D<br>Debtor 2.      | Debtor 1 and                               | Yes. Fill out this information for each dependent                         | Dependent's relationship to<br>Debtor 1 or Debtor 2                     | Dependent's age                      | Does dependent li with you?                    | i <b>ve</b>    |
|                                 |  |   | Child   | 19 years                             | No.<br>✓ Yes.                                  |                |
|                                 |  |   | Child   | 16 years                             | No.  Yes.                                      |                |
|                                 |  |   | Child   | 15 years                             | No.  Yes.                                      |                |
|                                 |  |   | Child   | 7 years                              | No.  |                |
|                                 |  |   |   |                                      | Yes.   |                |
|                                 | penses include<br>f people other           | No  |   |                                      |  |                |
| yourself and dependents         |  | Yes   |   |                                      |  |                |
| Part 2: Estil                   | mate Your Ongoin                           | g Monthly Expenses  |   |                                      |  |                |
|                                 | of a date after the ba                     |   | ou are using this form as a suppl<br>plemental Schedule J, check the    |                                      |  |                |
|                                 |  | n-cash government assistance i<br>d it on <i>Schedule I: Your Incom</i> e |   |                                      | Your exp                                       | penses         |
|                                 | or home ownership or the ground or lot. 4. | · ·   | clude first mortgage payments and                                       |                                      | 4.   | \$1,200.00     |
|                                 | uded in line 4:                            |   |   |                                      |  |                |
|                                 | state taxes                                |   |   |                                      | 4a   | \$0.00         |
| 4b. Proper                      | rty, homeowner's, or re                    | enter's insurance   |   |                                      | 4b.  | \$45.00        |

4c.

4d.

\$0.00

\$0.00

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

## Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 40 of 73

Debtor 1 Dwight Winters Case number (if known) Last Name

| First Name Middle Name Last Name   |            |               |
|--|------------|---------------|
|  |            | Your expenses |
| 5. Additional mortgage payments for your residence, such as home equity loans                          | 5.         | \$0.00        |
| 6. Utilities:  |            |               |
| 6a. Electricity, heat, natural gas   | 6a.        | \$217.00      |
| 6b. Water, sewer, garbage collection   | 6b.        | \$0.00        |
| 6c. Telephone, cell phone, Internet, satellite, and cable services                                     | 6c.        | \$0.00        |
| 6d. Other. Specify: Family Cell Phone Bill   | 6d         | \$250.00      |
| 7. Food and housekeeping supplies  | 7.         | \$1,120.00    |
| 8. Childcare and children's education costs  | 8.         | \$100.00      |
| 9. Clothing, laundry, and dry cleaning   | 9.         | \$350.00      |
| 10. Personal care products and services  | 10.        | \$300.00      |
| 11. Medical and dental expenses  | 11.        | \$30.00       |
| 12. <b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments   | 12.        | \$500.00      |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books                                 | 13.        | \$0.00        |
| 14. Charitable contributions and religious donations   | 14.        | \$0.00        |
| 15. <b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.    |            |               |
| 15a. Life insurance  | 15a        | \$0.00        |
| 15b. Health insurance  | 15b        | \$0.00        |
| 15c. Vehicle insurance   | 15c        | \$160.00      |
| 15d. Other insurance. Specify:   | 15d        | \$0.00        |
| 16. <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.            |            |               |
| Specify:   | 16         | \$0.00        |
| 17. Installment or lease payments:   | 10         |               |
| 17a. Car payments for Vehicle 1  | 17a        | \$0.00        |
| 17b. Car payments for Vehicle 2  | 17b        | \$0.00        |
| 17c. Other. Specify:   | 17c        | \$0.00        |
| 17d. Other. Specify:   | 17d        | \$0.00        |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from        |            | \$0.00        |
| your pay on line 5, Schedule I, Your Income (Official Form 106I).                                      | 18.        |               |
| 19.Other payments you make to support others who do not live with you.  Specify:                       | 40         |               |
| 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom | 19.        | \$0.00        |
| 20a. Mortgages on other property   | ne.<br>20a | \$0.00        |
| 20b. Real estate taxes.  | 20b        | \$0.00        |
| 20c. Property, homeowner's, or renter's insurance  | 20c        | \$0.00        |
| 20d. Maintenance, repair, and upkeep expenses.   | 20d        | \$0.00        |
| 20e. Homeowner's association or condominium dues   | 20e        | \$0.00        |
|  | 206        | <u> </u>      |

# Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 41 of 73

## Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 42 of 73

| Fill in this infor        | mation to identify your ca | ase:        |                              |  |
|---------------------------|----------------------------|-------------|------------------------------|--|
| Debtor 1                  | Dwight                     |             | Winters                      |  |
|                           | First Name                 | Middle Name | Last Name                    |  |
| Debtor 2                  |                            |             |                              |  |
| (Spouse, if filing)       | First Name                 | Middle Name | Last Name                    |  |
| United States E           | Bankruptcy Court for the:  | Northern    | District of Illinois (State) |  |
| Case number<br>(If known) | ·                          |             | (Giaio)                      |  |

#### Official Form 106Dec

Check if this is an amended filing

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below  |   |
|-----|--|---|
|     | Did you pay or agree to pay someone who is NOT an attorney to h                                    | nelp you fill out bankruptcy forms?   |
|     | <b>✓</b> No  |   |
|     | Yes. Name of person  | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
|     |  |   |
|     |  |   |
|     | Under penalty of perjury, I declare that I have read the summary a that they are true and correct. | and schedules filed with this declaration and   |
| ×   | /s/ Dwight Winters   | ×   |
|     | Signature of Debtor 1  | Signature of Debtor 2   |
|     | Date 10/3/2017   | Date  |
|     | MM/DD/YYYY   | MM/DD/YYYY  |

Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 43 of 73

|                | information to i                | dentify your c | ase:                 |  |                     |        |          |                            |
|----------------|---------------------------------|----------------|----------------------|--|---------------------|--------|----------|----------------------------|
| Debtor 1       | Dwight                          |                |                      | Winters  |                     |        |          |                            |
| Debtor 2       | First Nam                       | e              | Middle N             | lame Last Nan  | ne                  |        |          |                            |
| (Spouse, if fi | ling) First Nam                 | е              | Middle N             | lame Last Nan  | пе                  |        |          |                            |
| United Sta     | ates Bankruptcy                 | Court for the: | Northern             | District of Illing                                   |                     |        |          |                            |
| Case num       | nber                            |                |                      |  |                     |        |          |                            |
|                | . –                             | 407            |                      |  |                     |        |          | Check if this is a         |
| Offici         | al Form                         | 107            |                      |  |                     |        |          | amended filing             |
| Stater         | ment of F                       | inancia        | l Affairs f          | or Individuals                                       | Filing for B        | ankru  | ptcy     | 04/1                       |
| informati      |                                 | ace is neede   | ed, attach a sepa    | arried people are filing<br>arate sheet to this forn |                     |        |          |                            |
| Part 1:        | Give Details A                  | About Your     | Marital Status       | and Where You Lived                                  | l Before            |        |          |                            |
| 1. Wh          | at is your curre                | nt marital sta | atus?                |  |                     |        |          |                            |
| <b>~</b>       | Married                         |                |                      |  |                     |        |          |                            |
|                | Not married                     |                |                      |  |                     |        |          |                            |
| 2. Dur         | ring the last 3 y               | ears, have yo  | u lived anywhere     | other than where you li                              | ve now?             |        |          |                            |
|                | No                              |                |                      |  |                     |        |          |                            |
|                | Yes. List all of                | the places yo  | ou lived in the last | 3 years. Do not include                              | where you live now. |        |          |                            |
|                |                                 |                |                      |  |                     |        |          |                            |
|                | Debtor 1:                       |                |                      | Dates Debtor 1 lived there                           | Debtor 2:           |        |          | Dates Debtor 2 lived there |
|                |                                 |                |                      |  |                     |        |          |                            |
|                |                                 |                |                      |  | Same as Deb         | otor 1 |          | Same as Debtor 1           |
|                | 7755 S. East E<br>Number Street | nd             |                      | From 04/2011   | Number Street       |        |          | From                       |
|                |                                 |                |                      | To <u>04/2015</u>                                    |                     |        |          | To                         |
|                | Chicago                         | Illinois       | 60649                |  | -                   |        |          |                            |
|                | City                            | State          | Zip Code             |  | City Same as Deb    | State  | Zip Code | Same as Debtor 1           |
|                |                                 |                |                      |  | Same as Deb         | itor i |          | Same as Debior 1           |
|                | Number Street                   |                |                      | From   | Number Street       |        |          | From                       |
|                |                                 |                |                      | To   |                     |        |          | То                         |
|                | 0.1                             | Obsta          | 7'- 0- 1-            |  | 0.1                 | 01-1-  | 7'- 01-  |                            |
|                | City                            | State          | Zip Code             |  | City                | State  | Zip Code |                            |
|                |                                 |                |                      |  |                     |        |          |                            |

## Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 44 of 73

| Debte         | or 1                  | Dwight  | Winters   |   | number (if known)                                      |  |
|---------------|-----------------------|---|---|---|--|--|
|               |                       | First Name Middle   | e Name Last Nar   | me  |  |  |
| Part :        | 2:                    | Explain the Sources of Your Inc   | come  |   |  |  |
| ı             | Fill i                | you have any income from employm<br>n the total amount of income you receiv<br>ities. If you are filing a joint case and yo<br>No<br>Yes. Fill in the details.  | ved from all jobs and all busi  | nesses, including part-time   |  | ars?   |
| •             |                       |   | Debtor 1  |   | Debtor 2   |  |
|               |                       |   | Sources of income<br>Check all that apply.  | Gross income<br>(before deductions and<br>exclusions)                                     | Sources of income<br>Check all that apply.             | Gross income<br>(before deductions and<br>exclusions)            |
|               |                       | om January 1 of current year until<br>e date you filed for bankruptcy:  | Wages, commissions, bonuses, tips Operating a business                                    | \$52659.00  | Wages, commissions, bonuses, tips Operating a business |  |
|               |                       | or last calendar year: anuary 1 to December 31, 2016 ) YYYY   | Wages, commissions, bonuses, tips Operating a business                                    | \$57295.00  | Wages, commissions, bonuses, tips Operating a business |  |
|               |                       | or the calendar year before that: anuary 1 to December 31, 2015 ) YYYY  | Wages, commissions, bonuses, tips Operating a business                                    | \$81612.00  | Wages, commissions, bonuses, tips Operating a business |  |
| lr<br>p<br>fi | nclu<br>Jubli<br>Jing | you receive any other income during de income regardless of whether that in c benefit payments; pensions; rental in a joint case and you have income that each source and the gross income from No  Yes. Fill in the details. | ncome is taxable. Examples of come; interest; dividends; m you received together, list it | of other income are alimony;<br>oney collected from lawsuits<br>only once under Debtor 1. | s; royalties; and gambling and lot                     |  |
|               |                       |   | Debtor 1  |   | Debtor 2   |  |
|               |                       |   | Sources of income<br>Describe below.  | Gross income from<br>each source<br>(before deductions<br>and exclusions)                 | Sources of income<br>Describe below.                   | Gross income from each source (before deductions and exclusions) |
|               |                       | rom January 1 of current year until<br>ne date you filed for bankruptcy:  |   |   |  |  |
|               |                       | or last calendar year: anuary 1 to December 31, 2016 ) YYYY   |   |   |  |  |
|               |                       | or the calendar year before that:<br>anuary 1 to December 31, 2015 )<br>YYYYY   |   |   |  |  |
|               |                       |   |   |   |  |  |

#### Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 45 of 73

Winters Debtor 1 Dwight \_\_ Case number (if known) Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other

# Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 46 of 73

| otor 1 Dwight  |   |  | Wint                                      | ters  | Case number                                 | (if known)  |
|--|---|--|---|---|---|---|
| First Name   |   | Middle Name  | Last                                      | Name  |   |   |
| corporations of which  | elatives; an<br>you are an<br>or a busine | y general partners;<br>officer, director, p<br>ss you operate as | relatives of any g<br>erson in control, o | eneral partners; part<br>or owner of 20% or | nerships of which y<br>more of their voting | who was an insider? You are a general partner; You securities; and any managing You domestic support obligations, |
| ✓ No  Yes. List all payn   | nents to ar                               | n insider.   |   |   |   |   |
|  |   |  | Dates of payment                          | Total amount paid                           | Amount you still owe                        | Reason for this payment   |
| Insider's Name   |   |  |   |   |   |   |
| Number Street  |   |  |   |   |   |   |
| City   | State                                     | Zip Code   |   |   |   |   |
| Insider's Name   |   |  |   |   |   |   |
| Number Street  |   |  |   |   |   |   |
| City   | State                                     | Zip Code   |   |   |   |   |
| Within 1 year before insider? Include payments on company No Yes. List all payments and payments all payments | debts guara                               | anteed or cosigned   | by an insider.                            | Total amount paid                           | Amount you still owe                        | Reason for this payment   |
| la cialcula Nava   |   |  |   |   |   | Include creditor's name   |
| Insider's Name   |   |  |   |   |   |   |
| Number Street  |   |  |   |   |   |   |
| City   | State                                     | Zip Code   |   |   |   |   |
| Insider's Name   |   |  |   |   |   |   |
| Number Street  |   |  |   |   |   |   |
| City   | State                                     | Zip Code   |   |   |   |   |

### Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 47 of 73

Debtor 1 Dwight Winters Case number (if known) Middle Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No ◪ Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

## Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 48 of 73

| Debt | tor 1 Dwight  | Winters                    | Case number (if known)                         |                     |
|------|---|----------------------------|--|---------------------|
|      | First Name Middle Name  | Last Name                  |  |                     |
| 11.  | Within 90 days before you filed for bankruptcy, did a accounts or refuse to make a payment because you      |                            | eank or financial institution, set off any amo | unts from your      |
|      | ✓ No ☐ Yes. Fill in the details.  |                            |  |                     |
|      |   | Describe the action th     | e creditor took Date action was taken          | Amount              |
|      | Creditor's Name   |                            |  |                     |
|      | Number Street   |                            |  |                     |
|      |   | Last 4 digits of account   | number: XXXX-                                  |                     |
|      | City State Zip Code   |                            |  |                     |
| 12.  | Within 1 year before you filed for bankruptcy, was an appointed receiver, a custodian, or another official? |                            | possession of an assignee for the benefit of   | creditors, a court- |
|      | No  |                            |  |                     |
|      | Yes   |                            |  |                     |
| Part | 5: List Certain Gifts and Contributions   |                            |  |                     |
| 13.  | Within 2 years before you filed for bankruptcy, did y   | ou give any gifts with a t | otal value of more than \$600 per person?      |                     |
|      | No Yes. Fill in the details for each gift.  |                            |  |                     |
|      | Gifts with a total value of more than \$600 per person  | Describe the gifts         | Dates you gave the gifts                       | Value               |
|      |   |                            |  |                     |
|      | Person to Whom You Gave the Gift  |                            |  |                     |
|      | Number Street   |                            |  |                     |
|      | City State Zip Code   |                            |  |                     |
|      | Person's relationship to you  |                            |  |                     |
|      | Person to Whom You Gave the Gift  |                            |  |                     |
|      | Number Street   |                            |  |                     |
|      | City State Zip Code Person's relationship to you  |                            |  |                     |

## Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 49 of 73

| Debto  |             | Dwight   | Winters   | Case number (if know            | n)                                      |                      |
|--------|-------------|--|---|---------------------------------|---|----------------------|
|        |             | First Name Middle Name   | Last Name   |                                 |   |                      |
|        |             | the American Charles to the standard to  | 454   | Proceedings to the first of the | · f · · · · · · · · · · · · · · · · · · |                      |
| 14.    | Witi        | hin 2 years before you filed for bankruptcy,   | did you give any gifts or contrib   | utions with a total value of    | of more than \$600                      | to any charity?      |
|        | <b>✓</b>    | No   |   |                                 |   |                      |
|        | П           | Yes. Fill in the details for each gift or contrib  | oution.   |                                 |   |                      |
| ,      |             | Gifts or contributions to charities  | Describe what you conti   | ributed                         | Date you                                | Value                |
|        |             | that total more than \$600   | •   |                                 | contributed                             |                      |
|        |             |  |   |                                 |   |                      |
|        |             | Charity's Name   |   |                                 |   |                      |
|        |             |  |   |                                 |   |                      |
|        |             |  |   |                                 |   |                      |
|        |             | Number Street  |   |                                 |   |                      |
|        |             |  |   |                                 |   |                      |
|        |             | City State Zip Code  |   |                                 |   |                      |
| Dowl ( | ٥.          | List Certain Losses  |   |                                 |   |                      |
| Part   | 9.          | List Oei talli Losses  |   |                                 |   |                      |
| 45     | 147:11      | -: d   |   | did laaa aw.dhina baa           |   |                      |
|        |             | nin 1 year before you filed for bankruptcy on<br>abling?   | r since you med for bankruptcy,   | aid you lose anything bed       | ause of their, lire,                    | other disaster, or   |
|        | _           |  |   |                                 |   |                      |
|        | ⊻           | No   |   |                                 |   |                      |
|        |             | Yes. Fill in the details.  |   |                                 |   |                      |
|        |             | Describe the property you lost and   | Describe any insurance  |                                 | Date of your                            | Value of property    |
|        |             | how the loss occurred  | Include the amount that in  |                                 | loss                                    | lost                 |
|        |             |  | pending insurance claims A/B: Property.   | on line 33 of <i>Scheaule</i>   |   |                      |
|        |             |  | 7VB. Property.  |                                 |   |                      |
|        |             |  |   |                                 |   |                      |
|        |             |  |   |                                 |   |                      |
| 16.    | With        | List Certain Payments or Transfers  nin 1 year before you filed for bankruptcy, d ut seeking bankruptcy or preparing a bank  |   | your behalf pay or transfe      | er any property to a                    | anyone you consulted |
| 16.    | With<br>abo | nin 1 year before you filed for bankruptcy, dut seeking bankruptcy or preparing a bankude any attorneys, bankruptcy petition preparer  | ruptcy petition?  |                                 |   | anyone you consulted |
| 16.    | With<br>abo | nin 1 year before you filed for bankruptcy, d<br>ut seeking bankruptcy or preparing a bank<br>ude any attorneys, bankruptcy petition preparer  | ruptcy petition?  |                                 |   |                      |
| 16.    | With<br>abo | nin 1 year before you filed for bankruptcy, dut seeking bankruptcy or preparing a bankude any attorneys, bankruptcy petition preparer  | ruptcy petition?  | services required in your ba    | Date payment or transfer                | Amount of payment    |
| 16.    | With<br>abo | nin 1 year before you filed for bankruptcy, dut seeking bankruptcy or preparing a bank<br>ude any attorneys, bankruptcy petition preparer<br>No<br>Yes. Fill in the details.   | ruptcy petition? rs, or credit counseling agencies for Description and value of transferred | services required in your ba    | Date payment or transfer was made       | Amount of payment    |
| 16.    | With<br>abo | nin 1 year before you filed for bankruptcy, dut seeking bankruptcy or preparing a bankruptcy any attorneys, bankruptcy petition preparer No Yes. Fill in the details.  Semrad Law Firm   | ruptcy petition? s, or credit counseling agencies for  Description and value of             | services required in your ba    | Date payment or transfer                | Amount of            |
| 16.    | With<br>abo | nin 1 year before you filed for bankruptcy, dut seeking bankruptcy or preparing a bank<br>ude any attorneys, bankruptcy petition preparer<br>No<br>Yes. Fill in the details.   | ruptcy petition? rs, or credit counseling agencies for Description and value of transferred | services required in your ba    | Date payment or transfer was made       | Amount of payment    |
| 16.    | With<br>abo | nin 1 year before you filed for bankruptcy, dut seeking bankruptcy or preparing a bankruptcy and any attorneys, bankruptcy petition preparer No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid   | ruptcy petition? rs, or credit counseling agencies for Description and value of transferred | services required in your ba    | Date payment or transfer was made       | Amount of payment    |
| 16.    | With<br>abo | nin 1 year before you filed for bankruptcy, dut seeking bankruptcy or preparing a bankrupte any attorneys, bankruptcy petition preparer No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street   | ruptcy petition? rs, or credit counseling agencies for Description and value of transferred | services required in your ba    | Date payment or transfer was made       | Amount of payment    |
| 16.    | With<br>abo | nin 1 year before you filed for bankruptcy, dut seeking bankruptcy or preparing a bankruptcy any attorneys, bankruptcy petition preparer No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor   | ruptcy petition? rs, or credit counseling agencies for Description and value of transferred | services required in your ba    | Date payment or transfer was made       | Amount of payment    |
| 16.    | With<br>abo | nin 1 year before you filed for bankruptcy, dut seeking bankruptcy or preparing a bankruptcy any attorneys, bankruptcy petition preparer No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603  | ruptcy petition? rs, or credit counseling agencies for Description and value of transferred | services required in your ba    | Date payment or transfer was made       | Amount of payment    |
| 16.    | With<br>abo | nin 1 year before you filed for bankruptcy, dut seeking bankruptcy or preparing a bankruptcy any attorneys, bankruptcy petition preparer No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor   | ruptcy petition? rs, or credit counseling agencies for Description and value of transferred | services required in your ba    | Date payment or transfer was made       | Amount of payment    |
| 16.    | With<br>abo | nin 1 year before you filed for bankruptcy, dut seeking bankruptcy or preparing a bankruptcy any attorneys, bankruptcy petition preparer No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603  | ruptcy petition? rs, or credit counseling agencies for Description and value of transferred | services required in your ba    | Date payment or transfer was made       | Amount of payment    |
| 16.    | With<br>abo | nin 1 year before you filed for bankruptcy, dut seeking bankruptcy or preparing a bankruptcy any attorneys, bankruptcy petition preparer No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address   | ruptcy petition? rs, or credit counseling agencies for Description and value of transferred | services required in your ba    | Date payment or transfer was made       | Amount of payment    |
| 16.    | With<br>abo | nin 1 year before you filed for bankruptcy, dut seeking bankruptcy or preparing a bankruptcy any attorneys, bankruptcy petition preparer No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street  28th Floor  Chicago Illinois 60603  City State Zip Code  | ruptcy petition? rs, or credit counseling agencies for Description and value of transferred | services required in your ba    | Date payment or transfer was made       | Amount of payment    |
| 16.    | With<br>abo | nin 1 year before you filed for bankruptcy, dut seeking bankruptcy or preparing a bankrupte any attorneys, bankruptcy petition preparer No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address  Person Who Made the Payment, if Not You   | ruptcy petition? rs, or credit counseling agencies for Description and value of transferred | services required in your ba    | Date payment or transfer was made       | Amount of payment    |
| 16.    | With<br>abo | nin 1 year before you filed for bankruptcy, dut seeking bankruptcy or preparing a bankruptcy any attorneys, bankruptcy petition preparer No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address   | ruptcy petition? rs, or credit counseling agencies for Description and value of transferred | services required in your ba    | Date payment or transfer was made       | Amount of payment    |
| 16.    | With<br>abo | nin 1 year before you filed for bankruptcy, dut seeking bankruptcy or preparing a bankrupte any attorneys, bankruptcy petition preparer No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address  Person Who Made the Payment, if Not You   | ruptcy petition? rs, or credit counseling agencies for Description and value of transferred | services required in your ba    | Date payment or transfer was made       | Amount of payment    |
| 16.    | With<br>abo | nin 1 year before you filed for bankruptcy, dut seeking bankruptcy or preparing a bankrupte any attorneys, bankruptcy petition preparer No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid                                    | ruptcy petition? rs, or credit counseling agencies for Description and value of transferred | services required in your ba    | Date payment or transfer was made       | Amount of payment    |
| 16.    | With<br>abo | nin 1 year before you filed for bankruptcy, dut seeking bankruptcy or preparing a bankrupte any attorneys, bankruptcy petition preparer No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid                                    | ruptcy petition? rs, or credit counseling agencies for Description and value of transferred | services required in your ba    | Date payment or transfer was made       | Amount of payment    |
| 16.    | With<br>abo | nin 1 year before you filed for bankruptcy, dut seeking bankruptcy or preparing a bankrupte any attorneys, bankruptcy petition preparer No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid                                    | ruptcy petition? rs, or credit counseling agencies for Description and value of transferred | services required in your ba    | Date payment or transfer was made       | Amount of payment    |
| 16.    | With<br>abo | nin 1 year before you filed for bankruptcy, dut seeking bankruptcy or preparing a bankrupte any attorneys, bankruptcy petition preparer No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid Number Street  City State Zip Code | ruptcy petition? rs, or credit counseling agencies for Description and value of transferred | services required in your ba    | Date payment or transfer was made       | Amount of payment    |
| 16.    | With<br>abo | nin 1 year before you filed for bankruptcy, dut seeking bankruptcy or preparing a bankrupte any attorneys, bankruptcy petition preparer No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid Number Street                      | ruptcy petition? rs, or credit counseling agencies for Description and value of transferred | services required in your ba    | Date payment or transfer was made       | Amount of payment    |

# Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 50 of 73

| Debt |              | Dwight   |                         | Winters                                  | Case number (if known      | )  |                              |
|------|--------------|--|-------------------------|--|----------------------------|--|------------------------------|
|      |              | First Name   | Middle Name             | Last Name                                |                            |  |                              |
| 17.  | help         | nin 1 year before you filed<br>by you deal with your credit<br>not include any payment or t                              | tors or to make paym    |  | behalf pay or transfe      | any property to an                         | yone who promised to         |
|      | <b>✓</b>     | No<br>Yes. Fill in the details.  |                         |  |                            |  |                              |
|      | Ш            | res. Fili in the details.  |                         |  |                            |  |                              |
|      |              |  |                         | Description and value of any transferred | property                   | Date<br>payment or<br>transfer was<br>made | Amount of payment            |
|      |              | Person Who Was Paid  |                         |  |                            |  |                              |
|      |              | Number Street  |                         |  |                            |  |                              |
|      |              | City State   | Zip Code                |  |                            |  |                              |
|      | Inclu<br>and | ordinary course of your builde both outright transfers a transfers that you have alreated.  No Yes. Fill in the details. | and transfers made as s | security (such as the granting of a se   | ecurity interest or mortga | age on your property)                      | . Do not include gifts       |
|      |              |  |                         | Description and value of protransferred  |                            | y property or<br>eceived or debts pai      | Date transfer was made       |
|      |              | Person Who Received Tran   | sfer                    |  |                            |  |                              |
|      |              | Number Street  |                         |  |                            |  |                              |
|      |              | City State Person's relationship to you  | Zip Code<br>u           |  |                            |  |                              |
|      |              | Person Who Received Tran   | sfer                    |  |                            |  |                              |
|      |              | Number Street  |                         |  |                            |  |                              |
|      |              | City State<br>Person's relationship to you   | Zip Code<br>u           |  |                            |  |                              |
| 19.  | ben          | nin 10 years before you file<br>eficiary?<br>ese are often called asset-pro  |                         | d you transfer any property to a s       | elf-settled trust or sin   | nilar device of which                      | n you are a                  |
|      | _            | No   | ,                       |  |                            |  |                              |
|      |              | Yes. Fill in the details.  |                         |  |                            |  |                              |
|      |              |  |                         | Description and value of the             | e property transferred     |  | Date<br>transfer was<br>made |
|      |              | Name of trust  |                         |  |                            |  |                              |

#### Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 51 of 73

Winters Debtor 1 Dwight Case number (if known) Middle Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code City State Zip Code

#### Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 52 of 73

Winters Debtor 1 Dwight Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

# Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 53 of 73

| Deb |      | Dwight                             |   | Palalla Nama  | Winters   | Cas  | se number <i>(it</i> | fknown)           |  | _ |
|-----|------|------------------------------------|---|---|---|--|----------------------|-------------------|--|---|
|     |      | First Name                         | N.  | liddle Name   | Last Name   |  |                      |                   |  |   |
| 26. | Hav  | e you been a party                 | / in any judicia  | al or administr   | ative proceeding und  | der any environme  | ntal law? In         | clude settlements | and orders.                                  |   |
|     |      | No<br>Yes. Fill in the det         | ails.   |   |   |  |                      |                   |  |   |
|     |      |                                    |   |   | Court or agency   |  | Nature o             | of the case       | Status of the case                           |   |
|     |      | Case title                         |   |   |   |  |                      |                   | Pending                                      |   |
|     |      |                                    |   |   | Court Name  |  |                      |                   | On appeal                                    |   |
|     |      | Case number                        |   |   | NumberStreet  |  |                      |                   | Concluded                                    | ł |
|     |      | 1                                  |   |   | City State  | Zip Code   |                      |                   |  |   |
| Par | 11:  | Give Details Ab                    | out Your Bu   | siness or Co  | nnections to Any  | Business   |                      |                   |  |   |
| 27. | Witl | A sole propri                      | etor or self-em<br>a limited liabil<br>a partnership<br>rector, or man<br>at least 5% of<br>bove applies. | aployed in a tra<br>ity company (L<br>aging executiv<br>the voting or e<br>Go to Part 12. | ade, profession, or ot<br>LC) or limited liability<br>e of a corporation<br>quity securities of a code<br>details below for eac | her activity, either<br>partnership (LLP)<br>corporation |                      | _                 | business?                                    |   |
|     |      |                                    |   |   |   | ature of the busing                                      | ess                  |                   | cation number Do not ecurity number or ITIN. |   |
|     |      | Business Name  Number Street  City | State   | Zip Code  | Name of accou   | ıntant or bookkee  | per                  | Dates business e  |  |   |
|     |      |                                    | Citato  | <b>2.p code</b>   | Describe the n  | ature of the busing                                      | ess                  |                   | cation number Do not ecurity number or ITIN. |   |
|     |      | Business Name                      |   |   | _   |  |                      | EIN:              |  |   |
|     |      | Number Street                      |   |   | Name of accou   | ıntant or bookkee  | ner                  | Dates business e  | xisted                                       |   |
|     |      | City                               | State   | Zip Code  | - Name of accou   | intant of bookkee  | реі                  | From              | То   |   |
|     |      |                                    |   |   | Describe the n  | ature of the busing                                      | ess                  | include Social Se | cation number Do not ecurity number or ITIN. |   |
|     |      | Business Name                      |   |   | _   |  |                      | EIN:              |  |   |
|     |      | Number Street                      |   |   | Name of accou   | ıntant or bookkee  | per                  | Dates business e  | xisted                                       |   |
|     |      | City                               | State   | Zip Code  | _   |  |                      | From              | То   |   |
|     |      |                                    |   |   |   |  |                      |                   |  |   |

# Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 54 of 73

| Deb  | tor 1       | Dwight   |                                |  | Winters  | Case number (if known)  |
|------|-------------|--|--------------------------------|--|--|---|
|      |             | First Name   |                                | Middle Name                                    | Last Name  |   |
| 28.  |             | hin 2 years before<br>ditors, or other pa<br>No<br>Yes. Fill in the de | rties.                         | bankruptcy, did you                            | give a financial statemen                            | t to anyone about your business? Include all financial institutions,  |
|      |             |  |                                |  | Date issued  |   |
|      |             |  |                                |  |  |   |
|      |             | Name   |                                |  | MM/DD/YYYY   |   |
|      |             | Number Street  |                                |  |  |   |
|      |             | rambor onoor   |                                |  |  |   |
|      |             | City   | State                          | Zip Code                                       |  |   |
| Part | - 10        | Sign Below   |                                |  |  |   |
| t    | true a      | and correct. I und<br>kruptcy case can                                 | erstand that<br>result in fine | making a false state<br>es up to \$250,000, or | ment, concealing propert<br>imprisonment for up to 2 | nts, and I declare under penalty of perjury that the answers are cy, or obtaining money or property by fraud in connection with 0 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
|      |             |  | Dwight Winte                   |  |  | Signature of Debtor 2   |
|      |             | g  |                                |  |  | 0.9.1   |
|      |             | Date   | 10/3/2017                      |  |  | Date 10/3/2017  |
| ı    | Did yo      | ou attach additior   | nal pages to                   | Your Statement of Fi                           | nancial Affairs for Individu                         | uals Filing for Bankruptcy (Official Form 107)?   |
| [    | ▝           | lo<br>′es  |                                |  |  |   |
| ı    | Did yo      | ou pay or agree to   | pay someor                     | e who is not an atto                           | rney to help you fill out ba                         | ankruptcy forms?  |
| ı    | . <b></b> N | lo   |                                |  |  |   |
|      | _           | es. Name of person   | n                              |  |  | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).   |

Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 55 of 73

B2030 (Form 2030) (12/15)

#### **UNITED STATES BANKRUPTCY COURT**

Northern District of Illinois

|       |  | Northern Di                     | Strict of Illinois        |                    |                                 |
|-------|--|---------------------------------|---------------------------|--------------------|---------------------------------|
| In re | Dwight Winters   |                                 |                           | Case No.           |                                 |
| _     | Debtor   |                                 |                           |                    | (If known)                      |
|       |  |                                 |                           | Chapter            | Chapter 13                      |
|       | DISCLOSURE OF C  | OMPENSAT                        | ION OF ATT                | ORNEY F            | OR DEBTOR                       |
| 1.    | Pursuant to 11 U.S.C. § 329(a) and Fe compensation paid to me within one y rendered or to be rendered on behalf or | ear before the filing of        | the petition in bankrup   | otcy, or agreed to | be paid to me, for services     |
|       | For legal services, I have agreed to acc   | ept                             |                           |                    | \$4,000.00                      |
|       | Prior to the filing of this statement I ha   | ve received                     |                           |                    | \$0.00                          |
|       | Balance Due  |                                 |                           |                    | \$4,000.00                      |
| 2.    | The source of the compensation paid to   | o me was:                       |                           |                    |                                 |
|       | <b>J</b> Debtor  | Other (spe                      | cify)                     |                    |                                 |
| 3.    | The source of the compensation paid to   | o me is:                        |                           |                    |                                 |
|       | <b>✓</b> Debtor  | Other (spe                      | cify)                     |                    |                                 |
| 4.    | I have not agreed to share the abomembers and associates of my law   | ve-disclosed compens<br>v firm. | ation with any other p    | erson unless the   | y are                           |
|       | I have agreed to share the above-or members or associates of my law the people sharing in the compens              | irm. A copy of the agre         |                           |                    |                                 |
| 5.    | In return for the above-disclosed fee, I   | have agreed to render           | legal service for all asp | ects of the bank   | ruptcy case, including:         |
|       | <ul> <li>a. Analysis of the debtor's finance bankruptcy;</li> </ul>  | al situation, and rende         | ering advice to the debt  | or in determinin   | g whether to file a petition in |
|       | b. Preparation and filing of any pe  | etition, schedules, stat        | ements of affairs and p   | olan which may b   | pe required;                    |
|       | c. Representation of the debtor a  | the meeting of credito          | ors and confirmation h    | earing, and any a  | adjourned hearings thereof;     |
|       | d. Representation of the debtor in   | adversary proceeding            | s and other contested     | bankruptcy matt    | ters;                           |
| 6.    | By agreement with the debtor(s), the al  | oove-disclosed fee doe          | es not include the follo  | wing services:     |                                 |
|       |  |                                 |                           |                    |                                 |
|       |  |                                 |                           |                    |                                 |
|       |  | CERT                            | IFICATION                 |                    |                                 |
|       | certify that the foregoing is a complete or(s) in this bankruptcy proceedings.                                     | statement of any agree          | ement or arrangement      | for payment to n   | ne for representation of the    |
|       | 10/3/2017  |                                 | /s/ Amy                   | Gerstein           |                                 |
|       | Date   |                                 |                           | of Attorney        |                                 |
|       |  |                                 | Semrad                    | Law Firm           |                                 |
|       | _  |                                 |                           | f law firm         |                                 |
|       |  |                                 |                           |                    |                                 |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

|   | \$245 | filing fee         |
|---|-------|--------------------|
|   | \$75  | administrative fee |
| + | \$15  | trustee surcharge  |
|   | \$335 | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

|   | \$1,167 | filing fee         |
|---|---------|--------------------|
| + | \$550   | administrative fee |
|   | \$1,717 | total fee          |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

## Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

## Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 60 of 73

#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

| In re:          | Winters Jr, Dwight  Debtor(s) | Case No  |                                     |
|-----------------|-------------------------------|--|-------------------------------------|
|                 |                               | Chapter.   | Chapter13                           |
|                 | VERIFI                        | CATION OF CREDITOR MAT                                     | RIX                                 |
| TI<br>knowledge |                               | fy that the attached list of creditors is tr               | ue and correct to the best of their |
| Date:           | 10/3/2017                     | /s/ Winters Jr, Dv<br>Winters Jr, Dwig<br>Signature of Deb | ht                                  |

FLAGSHIP CREDIT ACCEPT 3 CHRISTY DR STE 201 CHADDS FORD, PA, 19317

SUNRISE CREDIT SERVICE 234 AIRPORT PLAZA BLVD S FARMINGDALE, NY, 11735

USA FUNDS/NAVIENT PO BOX 6180 INDIANAPOLIS, IN, 46206

USA FUNDS P.O. BOX 329250 Columbus, OH, 43232

ELKHART COUNTY CHILD S 301 S Main St Ste 100 Elkhart, IN, 46516

CAPITALONE c/o Pollack & Rosen, P.C 1825 Barrett Lakes Blvd Suite 510 Kennesaw, GA, 30144

FALLS COLLECTION SVC PO BOX 668 GERMANTOWN, WI, 53022

IRS 1 PO Box 7346 Philadelphia, PA, 19101

Quantum3 Group LLC PO Box 788 Kirkland, WA, 98083

CREDIT ACCEPTANCE 25505 West 12 Mile Road Ste. 3000 Southfield, MI, 48034

Nuvell Credit Company PO Box 130424 Saint Paul, MN, 55113 Peoples Gas PO BOX 2968 Milwaukee, WI, 53201

City of Chicago Parking 121 N. LaSalle St # 107A Chicago, IL, 60602

Harris & Harris LTD 111 West Jackson Boulevard Suite 400 Chicago, IL, 60604

Midland Funding LLC PO BOX 2011 Warren, MI, 48090

Crescent Bank & Trust PO Box 1407 Chesapeake, VA, 23327

IDOR-Bankruptcy Section PO Box 64338 Chicago, IL, 60664

HERITAGE ACCEPTANCE 120 W LEXINGTON ELKHART, IN, 46516

Village of Dolton 3348 Ridge Rd Municipal Collection of America Lansing, IL, 60438

IDHS 100 S. Grand Avenue E Springfield, IL, 62704

Hogan, Shaney 2608 California Road Elkhart, IN, 46514

Lewis, Veronica 4119 W. 192nd Place Country Club Hills, IL, 60478 IDHS c/o Terri Nunnally 509 S. 6th Street Springfield, IL, 62701

IDHS c/o Katrina Boarden 509 S. 6th Street Springfield, IL, 62701 Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 64 of 73

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

# RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 65 of 73

6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

#### Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 66 of 73

- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

## C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

  Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76
- 3. Before signing this agreement, the attorney has received, \$0.00 toward the flat fee, leaving a balance due of \$4,000.00; and \$61.76 for expenses, leaving a balance due of \$4,371.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date:     | 10/3/2017  |  |
|-----------|------------|--|
| Signed:   |            | A-1.1  |
| /s/ Dwigl | nt Winters | Null   |
| -         |            | The state of the s |
| Debtor(s) | )          |  |

/s/ Amy Gerstein

Attorney for Debtor(s)

Do not sign if the fee amounts at top of this page are blank.

# Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 69 of 73

| Debtor 1 Dwight  |  |  | Case number (if known)   |                   |
|--|--|--|--|-------------------|
| First Name  Part 6: Answer These Qu  | Middle Name Last estions for Reporting Purposes  | t Name   |  |                   |
| 16. What kind of debts do you have?  | 16a. Are your debts primarily or "incurred by an individual property No. Go to line 16b.  Yes. Go to line 17.  16b. Are your debts primarily but | rimarily for a personal, usiness debts? Busine estment or through the                            | sumer debts are defined in 11 U.S.C. § 101(8) as family, or household purpose."  ess debts are debts that you incurred to obtain a operation of the business or investment.  | 5                 |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?  | No. I am not filing under Chapter 7.  Yes. I am filing under Chapter 7.  expenses are paid that fund No.  Yes.                                   | Do you estimate that after   | er any exempt property is excluded and administrati<br>tribute to unsecured creditors?   | ive               |
| 18. How many creditors<br>do you estimate that<br>you owe?   | <ul><li>✓ 1-49</li><li>☐ 50-99</li><li>☐ 100-199</li><li>☐ 200-999</li></ul>   | 1,000-5,000<br>5,001-10,000<br>10,001-25,000   | 25,001-50,000<br>50,001-100,000<br>More than 100,000   | . •1              |
| 19. How much do you<br>estimate your assets<br>to be worth?  | ☐ \$0-\$50,000  ☑ \$50,001-\$100,000  ☐ \$100,001-\$500,000  ☐ \$500,001-\$1 million   | \$1,000,001-\$1<br>\$10,000,001-\$<br>\$50,000,001-\$<br>\$100,000,001-                          | \$50 million   | ion               |
| 20. How much do you<br>estimate your<br>liabilities to be?   | □ \$0-\$50,000<br>□ \$50,001-\$100,000<br>☑ \$100,001-\$500,000<br>□ \$500,001-\$1 million   | \$1,000,001-\$1<br>\$10,000,001-\$<br>\$50,000,001-\$<br>\$100,000,001-                          | \$1,000,000,001-\$10 billi<br>\$100 million \$10,000,000,001-\$50 bil  | ion               |
| Part 7: Sign Below   |  |  |  |                   |
| For you  | correct.  If I have chosen to file under Chap of title 11, United States Code. I u under Chapter 7.  | oter 7, I am aware that I<br>nderstand the relief ava<br>did not pay or agree to                 | r of perjury that the information provided is true may proceed, if eligible, under Chapter 7, 11,12 allable under each chapter, and I choose to proceed pay someone who is not an attorney to help make equired by 11 U.S.C. § 342(b). | l, or 13<br>ceed  |
|  | I request relief in accordance with I understand making a false statem   | the chapter of title 11,<br>nent, concealing proper<br>e can result in fines up<br>19, and 3571. | United States Code, specified in this petition. rty, or obtaining money or property by fraud in to \$250,000, or imprisonment for up to 20 year  Signature of Debtor 2   | rs, or            |
| STORENT TO THE STANDARD STANDA | Executed on 10/3/2017<br>MM / DD / Y   |  | Executed onMM / DD / YYYY  | ant was a best on |

# Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 70 of 73

|                                 | rmation to identify your c                        |                           |                                 |  |                  |
|---------------------------------|---|---------------------------|---------------------------------|--|------------------|
| Dobtor 1                        | mader to lacitary your o                          | ase:                      |                                 |  |                  |
| Debtor 1                        | Dwight  |                           | Winters                         |  |                  |
|                                 | First Name  | Middle Name               | Last Name                       |  |                  |
| Debtor 2<br>(Spouse, if filing) | First Name  | Middle Name               | Last Name                       |  |                  |
| United States                   | Bankruptcy Court for the:                         | Northern                  | District of Illinois            |  |                  |
|                                 | summapley count for the.                          | Nottriesh                 | (State)                         | —  |                  |
| Case number<br>(if known)       |   |                           |                                 | _  |                  |
|                                 |   |                           |                                 | Check if thi   | s is a           |
| Official                        | Form 106De  | <u>:C</u>                 |                                 | amended fi   | ing              |
| Declarat                        | ion About an                                      | Individual Deb            | tor's Schedules                 |  | 12/1             |
| If two married                  | neonle are filing togeth                          | er both are equally respo | onsible for supplying correct   | information  |                  |
| money or prop                   | erty by fraud in connect<br>1341, 1519, and 3571. | ion with a bankruptcy ca  | se can result in fines up to \$ | king a false statement, concealing property, or obtaining<br>S250,000, or imprisonment for up to 20 years, or both. 18 |                  |
| Part 1: Sign                    | Below   |                           |                                 |  |                  |
|                                 |   | one who is NOT an attor   | ney to help you fill out bankı  | ruptcy forms?  | Marining or a se |
|                                 |   | one who is NOT an attor   | ney to help you fill out bank   | ruptcy forms?  |                  |
| Did you p                       |   | one who is NOT an attor   |                                 | etition Preparer's Notice, Declaration, and  |                  |

Signature of Debtor 2

MM/DD/YYYY

Date

Signature of Debtor 1

MM/DD/YYYY

Date 10/3/2017

# Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 71 of 73

| Debtor | r 1 Dwight  |                      |   | Winters                  | Case number (if known)   |  |  |  |
|--------|---|----------------------|---|--------------------------|--|--|--|--|
|        | First Name  | Mic                  | dle Name                                | Last Name                |  |  |  |  |
|        | reditors, or othe   |                      | nkruptcy, did yo                        | u give a financial state | ement to anyone about your business? Include all financial institutions,   |  |  |  |
| li.    | d   |                      |   | Date issued              |  |  |  |  |
|        |   |                      |   |                          |  |  |  |  |
|        | Name  |                      |   | MM/DD/YYYY               |  |  |  |  |
|        | Number St   | root                 | *************************************** | -                        |  |  |  |  |
|        | Number 3  | i eet                |   |                          |  |  |  |  |
|        | City  | State                | Zip Code                                | •                        |  |  |  |  |
| Part 1 | 2: Sign Belov   |                      |   |                          |  |  |  |  |
|        |   |                      |   |                          | pperty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |  |  |  |
|        | S   | ignature of Debtor 1 | Carrie                                  |                          | Signature of Debtor 2  |  |  |  |
|        | D   | ate 10/3/2017        |   |                          | Date 10/3/2017   |  |  |  |
| Did    | Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |                      |   |                          |  |  |  |  |
|        | No<br>Yes   |                      |   |                          |  |  |  |  |
| Did    | Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?                                 |                      |   |                          |  |  |  |  |
| [Z]    | No  |                      |   |                          |  |  |  |  |
|        | Yes. Name of p  | erson                |   |                          | Attach the Bankruptcy Petition Preparer's Notice,<br>Declaration, and Signature (Official Form 119).                             |  |  |  |

Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 72 of 73

#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

| In re:          | Winters Jr, Dwight | Case No   |                                      |
|-----------------|--------------------|---|--------------------------------------|
|                 | Debtor(s)          |   |                                      |
|                 |                    | Chapter.  | Chapter13                            |
|                 | VERI               | FICATION OF CREDITOR MAT                        | TRIX                                 |
| Th<br>knowledge | <del>-</del>       | erify that the attached list of creditors is to | rue and correct to the best of their |
| Date:           | 10/3/2017          | /s/ Winters Jr, D<br>Winters Jr, Dwig           |                                      |
|                 |                    | Signature of Del                                |                                      |

# Case 17-29606 Doc 1 Filed 10/03/17 Entered 10/03/17 13:36:35 Desc Main Document Page 73 of 73

| Debt | or 1 Dwight First Name  | Middle Name   | Winters<br>Last Name         | Case number (if known)  |   |  |  |  |  |
|------|---|---|------------------------------|---|---|--|--|--|--|
| 16   |   | family income that applies to y   | w                            | en la rementa alla contra del contra | en i transcer e transcer en |  |  |  |  |
|      | 16a. Fill in the state in w   |   | Illinois                     |   |   |  |  |  |  |
|      |   | of people in your household.  | 6                            |   |   |  |  |  |  |
|      |   | amily income for your state and si                                      | ze of                        |   | \$108,016.00  |  |  |  |  |
|      | household To find a list of applicable median income amounts, go online   |   |                              |   |   |  |  |  |  |
| 17.  | using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.  How do the lines compare?   |   |                              |   |   |  |  |  |  |
|      | ·   |   |                              |   |   |  |  |  |  |
|      |   |   |                              | of Disposable Income (Official Form 122C-2).  |   |  |  |  |  |
|      | U.S.C. § 1325   |   | Calculation of Disposab      | box 2, Disposable income is determined under 11 le Income (Official Form 122C-2). On line 39 of that  | t   |  |  |  |  |
| Part | 3: Calculate Your C   | Commitment Period Under   | 11 U.S.C. §1325(b)(4         | )   |   |  |  |  |  |
| 18.  | Copy your total averag  | e monthly income from line 11   | •                            |   | \$6,335.99  |  |  |  |  |
| 19.  | Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. |   |                              |   |   |  |  |  |  |
|      | 19a. If the marital adjust  | ment does not apply, fill in 0 on I                                     | ine 19a.                     |   | -\$0.00   |  |  |  |  |
|      | 19b. Subtract line 19a  | from line 18.   |                              |   | \$6,335.99  |  |  |  |  |
| 20.  | Calculate your current  | monthly income for the year.  | ollow these steps:           |   |   |  |  |  |  |
|      | 20a. Copy line 19b.   |   |                              |   | \$6,335.99  |  |  |  |  |
|      | Multiply by 12 (the   | number of months in a year).  |                              |   | x 12  |  |  |  |  |
|      | 20b. The result is your c   | urrent monthly income for the year                                      | ar for this part of the form |   | \$76,031.88   |  |  |  |  |
|      | 20c. Copy the median fa   | amily income for your state and si                                      | ze of household from line    | 16c.  | \$108,016.00  |  |  |  |  |
| 21.  | How do the lines comp   | low do the lines compare?   |                              |   |   |  |  |  |  |
|      | Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4.  |   |                              |   |   |  |  |  |  |
|      |   | an or equal to line 20c. Unless oth<br>period is 5 years. Go to Part 4. | nerwise ordered by the co    | urt, on the top of page 1 of this form, check box   |   |  |  |  |  |
| Part | 4: Sign Below   |   |                              |   |   |  |  |  |  |
|      | By signing here I de  | eclare under penalty of periusy that                                    | t the information on this s  | tatement and in any attachments is true and correct.  |   |  |  |  |  |
|      | by signing flore, I de  | A   | s are mormation on this s    | nation and an arry attachments is true and correct.   |   |  |  |  |  |
|      | 🗶 /s/ Dwight W  | inters  | ······· <b>X</b>             |   |   |  |  |  |  |
|      | Signature of Det  | otor 1  | Sig                          | nature of Debtor 2  |   |  |  |  |  |
|      | Date 10/3/201   | 7   | Da                           | te  |   |  |  |  |  |
|      | MM/DD/\   | YYY   |                              | MM/DD/YYYY  |   |  |  |  |  |
|      | If you checked 17a, do NOT fill out or file Form 122C-2.  If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.  |   |                              |   |   |  |  |  |  |